## Case 3:20-bk-30380-SHB Doc 1 Filed 02/07/20 Entered 02/07/20 15:09:35 Desc Main Document Page 1 of 60

Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
EASTERN DISTRICT OF TENNESSEE	-	
Case number (if known)	Chapter you are filing under:	
	Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	Check if this is an amended filing

# Official Form 101

# Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pai	t 1: Identify Yourself			
		About Debtor 1:		About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name			
Write the name that is on your government-issued picture identification (for example, your driver's license or passport).  Bring your picture identification to your meeting with the trustee.		Sean First name  Michael Middle name  Goodman Last name and Suffix (Sr., Jr., II, III)		Nicole First name  Marie Middle name  Goodman  Last name and Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years Include your married or maiden names.			FKA Nicole Parks
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-2369		xxx-xx-2183

Debtor 1 Sean Michael Goodman
Debtor 2 Nicole Marie Goodman

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):			
4.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years	■ I have not used any business name or EINs.	■ I have not used any business name or EINs.			
	Include trade names and doing business as names	Business name(s)	Business name(s)			
		EINS	EINs			
5.	Where you live		If Debtor 2 lives at a different address:			
		1222 Vista Ridge Way #104 Knoxville, TN 37909				
		Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code			
		Knox				
		County	County			
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.			
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code			
6.	Why you are choosing this district to file for	Check one:	Check one:			
	bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.			
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)			

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Debtor 2 **Nicole Marie Goodman** Case number (if known) **Tell the Court About Your Bankruptcy Case** Part 2: Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy 7. The chapter of the Bankruptcy Code you are (Form 2010)). Also, go to the top of page 1 and check the appropriate box. choosing to file under Chapter 7 ☐ Chapter 11 ☐ Chapter 12 ☐ Chapter 13 How you will pay the fee I will pay the entire fee when I file my petition. Please check with the clerk's office in your local court for more details about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order. If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a pre-printed address. I need to pay the fee in installments. If you choose this option, sign and attach the Application for Individuals to Pay The Filing Fee in Installments (Official Form 103A). I request that my fee be waived (You may request this option only if you are filing for Chapter 7. By law, a judge may, but is not required to, waive your fee, and may do so only if your income is less than 150% of the official poverty line that applies to your family size and you are unable to pay the fee in installments). If you choose this option, you must fill out the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file it with your petition. Have you filed for No. bankruptcy within the last 8 years? ☐ Yes. When Case number District When Case number District When District Case number 10. Are any bankruptcy ■ No cases pending or being filed by a spouse who is ☐ Yes. not filing this case with you, or by a business partner, or by an affiliate? Relationship to you Debtor When Case number, if known District Debtor Relationship to you When Case number, if known District 11. Do you rent your Go to line 12. ☐ No. residence? Has your landlord obtained an eviction judgment against you? Yes. No. Go to line 12. Yes. Fill out Initial Statement About an Eviction Judgment Against You (Form 101A) and file it with this bankruptcy petition.

Debtor 1

Sean Michael Goodman

Dek	Nicole Marie Good	dman		Case number (if known)
Par	t 3: Report About Any Bu	sinesses	You Own as a Sole Propri	etor
12.	Are you a sole proprietor			
	of any full- or part-time business?	■ No.	Go to Part 4.	
		☐ Yes.	Name and location of bu	siness
	A sole proprietorship is a		Name of husiness if an	
	business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name of business, if any	
	If you have more than one sole proprietorship, use a separate sheet and attach		Number, Street, City, Sta	ate & ZIP Code
	it to this petition.		Check the appropriate b	ox to describe your business:
			☐ Health Care Bus	iness (as defined in 11 U.S.C. § 101(27A))
			☐ Single Asset Rea	al Estate (as defined in 11 U.S.C. § 101(51B))
			☐ Stockbroker (as	defined in 11 U.S.C. § 101(53A))
			☐ Commodity Brok	er (as defined in 11 U.S.C. § 101(6))
			☐ None of the above	ve
Chapter 11 of the deadlines. If you indicate that you are a small business debtor, you must attach your in			e court must know whether you are a small business debtor so that it can set appropriate a small business debtor, you must attach your most recent balance sheet, statement of federal income tax return or if any of these documents do not exist, follow the procedure	
	For a definition of small	■ No.	I am not filing under Cha	pter 11.
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am filing under Chapte Code.	r 11, but I am NOT a small business debtor according to the definition in the Bankruptcy
		☐ Yes.	I am filing under Chapte	r 11 and I am a small business debtor according to the definition in the Bankruptcy Code.
Dar	t 4: Report if You Own or	Have An	, Hazardous Property or Λ	ny Property That Needs Immediate Attention
	Do you own or have any	■ No.	Trazardous Froperty of A	iy Hoperty That Needs ininiculate Attention
	property that poses or is	_		
	alleged to pose a threat of imminent and	☐ Yes.	What is the hazard?	
	identifiable hazard to			
	public health or safety? Or do you own any			
	property that needs immediate attention?		If immediate attention is needed, why is it needed?	
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where is the property?	Number, Street, City, State & Zip Code

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Debtor 1 Sean Michael Goodman
Debtor 2 Nicole Marie Goodman

Case number (if known)

Part 5:

**Explain Your Efforts to Receive a Briefing About Credit Counseling** 

#### Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

#### About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit counseling because of:

#### ☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

#### ☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

#### ☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

### About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

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I am not required to receive a briefing about credit
counseling because of:

#### Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

#### ☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

#### ☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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dman	Case number (if known)			
tions for R	eporting Purposes			
16a.	Are your debts primarily co			ed in 11 U.S.C. § 101(8) as "incurred by an
	☐ No. Go to line 16b.			
	■ Yes. Go to line 17.			
16b.				
	☐ No. Go to line 16c.			
	☐ Yes. Go to line 17.			
16c.	State the type of debts you ov	we that are not consumer deb	bts or business	s debts
□ No.	I am not filing under Chapter	7. Go to line 18.		
■ Yes.	are paid that funds will be ava			erty is excluded and administrative expenses
	☐ Yes			
□ 100-1	99	☐ 1,000-5,000 ☐ 5001-10,000 ☐ 10,001-25,000		☐ 25,001-50,000 ☐ 50,001-100,000 ☐ More than100,000
□ \$50,0 □ \$100,	01 - \$100,000 001 - \$500,000	□ \$10,000,001 - \$50 □ \$50,000,001 - \$100	million O million	☐ \$500,000,001 - \$1 billion ☐ \$1,000,000,001 - \$10 billion ☐ \$10,000,000,001 - \$50 billion ☐ More than \$50 billion
□ \$50,0 ■ \$100,	001 - \$100,000 001 - \$500,000	□ \$10,000,001 - \$50 □ \$50,000,001 - \$100	million O million	□ \$500,000,001 - \$1 billion □ \$1,000,000,001 - \$10 billion □ \$10,000,000,001 - \$50 billion □ More than \$50 billion
If I have United S  If no atto documer  I request  I underst bankrupt and 357'/s/ Sear  Sean M Signature	chosen to file under Chapter 7, tates Code. I understand the remove represents me and I did not, I have obtained and read the relief in accordance with the cland making a false statement, ccy case can result in fines up to 1.  In Michael Goodman ichael Goodman e of Debtor 1	I am aware that I may proce elief available under each character of pay or agree to pay some enotice required by 11 U.S.C. chapter of title 11, United State concealing property, or obtain to \$250,000, or imprisonment /s/ Ni Nico Signa	eed, if eligible, upper, and I choone who is not c. § 342(b).  es Code, specining money or for up to 20 years.  icole Marie Gootsture of Debtor	under Chapter 7, 11,12, or 13 of title 11, cose to proceed under Chapter 7.  an attorney to help me fill out this ified in this petition.  Tropoerty by fraud in connection with a ears, or both. 18 U.S.C. §§ 152, 1341, 1519  Goodman
	16a.  16b.  16c.  No.  Yes.  1-49  50-99  100-1  200-9  \$50,0  \$100,0  \$500,0  \$500,0	tions for Reporting Purposes  16a.	tions for Reporting Purposes  16a. Are your debts primarily consumer debts? Consumer individual primarily for a personal, family, or household purposes. Individual primarily for a personal, family, or household purposes. Individual primarily for a personal, family, or household purposes. Individual primarily for a personal, family, or household purposes. Individual primarily for a personal, family, or household purpose for a business or investment or through the operation of the personal primarily business debts? Business demoney for a business or investment or through the operation of the personal primarily business debts? Business demoney for a business or investment or through the operation.    No.   Are your debts primarily business debts? Business deb	tions for Reporting Purposes  16a.

Debtor 1 Sean Michael Goo Debtor 2 Nicole Marie Goo		Page 7 of 60	e number (if known)	
<u>-1110010 III110 000</u>	uniu.	_	,	
For your attorney, if you are represented by one  If you are not represented by an attorney, you do not need to file this page.	I, the attorney for the debtor(s) named in this petit under Chapter 7, 11, 12, or 13 of title 11, United S for which the person is eligible. I also certify that and, in a case in which § 707(b)(4)(D) applies, cerschedules filed with the petition is incorrect.	tates Code, and have e I have delivered to the o	explained the relief a debtor(s) the notice	available under each chapter required by 11 U.S.C. § 342(b)
to me uns page.	/s/ Cynthia T. Lawson Signature of Attorney for Debtor	Date	February 6, 20 MM / DD / YYYY	
	Cynthia T. Lawson 018397 Printed name Bond, Botes & Lawson, P.C. Firm name 6704 Watermour Way Knoxville, TN 37912 Number, Street, City, State & ZIP Code			

Email address

Contact phone (865) 938-0733

018397 TN Bar number & State cynthialawson@bbllawgroup.com

	II in this inform	action to identify you	r 00001				
		nation to identify you					
De	ebtor 1	Sean Michael G First Name	oodman Middle Name	Last Name			
De	ebtor 2	Nicole Marie Go	odman				
(Sp	oouse if, filing)	First Name	Middle Name	Last Name			
Ur	nited States Bar	nkruptcy Court for the:	EASTERN DISTRICT (	OF TENNESSEE			
Ca	ase number						
(if k	known)					_	neck if this is an
						an	nended filing
$\sim$	£ioiol ⊏oπ	was 407					
	fficial For		Affairs for Indiv	iduals Eiling for	Bankruntov		414
				iduals Filing for		for	4/1
info	ormation. If m	ore space is needed	, attach a separate sheet t	e are filing together, both a to this form. On the top of a			
nuı	mber (if known	n). Answer every que	stion.				
Pa	art 1: Give D	etails About Your M	arital Status and Where Y	ou Lived Before			
1.	What is your	current marital state	us?				
	Married						
	□ Not mari	ried					
2.	During the la	est 3 years have you	lived anywhere other tha	n where you live now?			
۷.		ist 5 years, nave you	iived arrywriere other tha	iii where you live now :			
	□ No						
	Yes. List	t all of the places you	lived in the last 3 years. Do	not include where you live n	OW.		
	Debtor 1 Pri	ior Address:	Dates Debtor lived there	1 Debtor 2 Prior	Address:		Dates Debtor 2 lived there
	185 Caprin Harrogate,		From-To: <b>2018 to 201</b> 9	Same as Debte	or 1		Same as Debtor 1 From-To:
		Grass Circle	From-To:	Same as Debte	or 1		Same as Debtor 1
	Castle Roo	ck, CO 80109	2017 to 3/20	18			From-To:
3.	Within the la	st 8 vears. did vou e	ver live with a spouse or	egal equivalent in a comm	unity property state or	territory'	? (Community property
				Nevada, New Mexico, Puerto			
	■ No						
	_	ke sure you fill out Sc	hedule H: Your Codebtors (	Official Form 106H).			
De		n the Sources of You		,			
1 6	LXPIan	ir the Sources of Tot	ii iiicoiiie				
4.				ting a business during this		us calen	dar years?
				d all businesses, including pa vive together, list it only once			
	□ No						
	_	in the details.					
			Dobton 4		Dobte: 0		
			Debtor 1	Ones la su	Debtor 2		One as leave
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply		Gross income (before deductions and exclusions)

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

page 1

Debtor 1 Sean Michael Goodman

Debtor 2 Nicole Marie Goodman

Main Document Pag

Main Document Pag

				Debtor 1		Debtor 2	
Sources of income Check all that apply.			Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)		
From January 1 of current year until the date you filed for bankruptcy:		■ Wages, commissions, bonuses, tips	\$1,626.00	☐ Wages, commissions, bonuses, tips	\$0.00		
				☐ Operating a business		☐ Operating a business	
	or last calen anuary 1 to		31, 2019 )	■ Wages, commissions, bonuses, tips	\$29,516.00	☐ Wages, commissions, bonuses, tips	\$0.00
				☐ Operating a business		☐ Operating a business	
	or the calend anuary 1 to			■ Wages, commissions, bonuses, tips	\$27,040.00	■ Wages, commissions, bonuses, tips	\$4,592.00
				☐ Operating a business		☐ Operating a business	
	□ No	source and t	Ū	me from each source separa	ately. Do not include income th	nat you listed in line 4.	
	Yes.	Fill in the de	etails.				
				Debtor 1		Debtor 2	
				Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Sources of income Describe below.	Gross income (before deductions and exclusions)
	om January e date you f		nt year until nkruptcy:		\$0.00	Social Security Disability	\$1,463.00
	or last calen anuary 1 to		31, 2019 )		\$0.00	Social Security Disability	\$2,880.00
P	art 3: List	Certain Pa	nyments You	Made Before You Filed for	Bankruptcy		
6.	Are either ☐ No.	Neither D	ebtor 1 nor D	s debts primarily consume lebtor 2 has primarily cons personal, family, or househo	umer debts. Consumer debts	s are defined in 11 U.S.C. § 10	1(8) as "incurred by an
		□ No.	90 days befo Go to line 7		id you pay any creditor a total	of \$6,825* or more?	
		☐ Yes	paid that cre		nts for domestic support oblig	n one or more payments and the ations, such as child support a	
		* Subject	to adjustment	on 4/01/22 and every 3 year	rs after that for cases filed on	or after the date of adjustment	
	Yes.			r both have primarily constructions of the result of the r	umer debts. id you pay any creditor a total	of \$600 or more?	
		□ No.	Go to line 7				
		■ Yes	include pay			the total amount you paid that port and alimony. Also, do not i	

Debto	or 1 Sean Michael Goodman	Main Document	i age 10 oi	00		
Debto	or 2 Nicole Marie Goodman		Cas	se number (if known)	-	
(	Creditor's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Was this pa	yment for
3	Esb/harley Davidson Cr 3850 Arrowhead Drive Carson City, NV 89706	90 days	\$1,120.00	\$10,831.00	☐ Mortgage ■ Car ☐ Credit Ca ☐ Loan Rep ☐ Suppliers ☐ Other	ard payment
<i>Ir</i> of a	Vithin 1 year before you filed for bankrup nsiders include your relatives; any general p f which you are an officer, director, person in business you operate as a sole proprietor. limony.	artners; relatives of any gern control, or owner of 20% of	neral partners; partners partners or more of their votin	erships of which yog g securities; and a	ou are a genera ny managing a	al partner; corporation gent, including one f
	<ul><li>No</li><li>Yes. List all payments to an insider.</li></ul>					
ı	nsider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for	this payment
I Part 4	nsider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for Include cred	this payment itor's name
Li	Within 1 year before you filed for bankruprist all such matters, including personal injury nodifications, and contract disputes.  ☐ No ☐ Yes. Fill in the details.					
	Case title Case number	Nature of the case	Court or agency		Status of th	e case
(	Cavalry SPV I, LLC v. Nicole Goodman 16081K	Civil	Knox County C Sessions Cour Civil Division P O Box 379 Knoxville, TN 3	t Dkt # 16081K	■ Pending □ On appe □ Conclude	
	Premier Members Credit Union vs. Sean Goodman 2018C32697	Civil Collections	Weld County C County Court 901 9th Ave, Greeley, CO 80		☐ Pending ☐ On appe ☐ Conclude	al
	Within 1 year before you filed for bankrup theck all that apply and fill in the details belowed No. Go to line 11.  ■ Yes. Fill in the information below.		erty repossessed, t	oreclosed, garni	shed, attached	l, seized, or levied?
(	Creditor Name and Address	Describe the Property		Date		Value of th
		Explain what happene	d			propert

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Del	otor 2 Nicole Marie Goodman	Case number	(if known)	
	Creditor Name and Address	Describe the Property	Date	Value of the
		Explain what happened		property
	Premier Members Credit Union	wages garnished	in last year	\$4,995.51
	5505 Arapahoe Ave.	Dranasty was renessed		
	Boulder, CO 80303	☐ Property was repossessed. ☐ Property was foreclosed.		
		■ Property was garnished.		
		☐ Property was attached, seized or levied.		
11.	Within 90 days before you filed for ban accounts or refuse to make a payment	kruptcy, did any creditor, including a bank or financial in because you owed a debt?	stitution, set off any a	mounts from your
	No			
	☐ Yes. Fill in the details.			
	Creditor Name and Address	Describe the action the creditor took	Date action was taken	Amoun
Pai	court-appointed receiver, a custodian,  No  Yes  List Certain Gifts and Contribution			
13.	Within 2 years before you filed for bank ■ No □ Yes. Fill in the details for each gift.	cruptcy, did you give any gifts with a total value of more	than \$600 per person?	?
	Gifts with a total value of more than \$6 per person	Describe the gifts	Dates you gave the gifts	Value
	Person to Whom You Gave the Gift an Address:	d		
14.	Within 2 years before you filed for bank  ■ No □ Yes. Fill in the details for each gift or	cruptcy, did you give any gifts or contributions with a tot contribution.	al value of more than	\$600 to any charity?
	Gifts or contributions to charities that more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Co	,	Dates you contributed	Value
Pai	t 6: List Certain Losses			
15.	Within 1 year before you filed for banks or gambling?	ruptcy or since you filed for bankruptcy, did you lose any	thing because of thef	t, fire, other disaste
	No			
	☐ Yes. Fill in the details.			
	Describe the property you lost and	Describe any insurance coverage for the loss	Date of your	Value of property
	how the loss occurred	Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property.	loss	los

Debtor 1 Sean Michael Goodman
Debtor 2 Nicole Marie Goodman

Pal	List Certain Payments or Transfers						
16.	Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition?  Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy.						
	□ No						
	Yes. Fill in the details.						
	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not You	transferred	value of any prope	rty	Date payment or transfer was made	Amount of payment	
	Bond, Botes & Lawson, P.C. 6704 Watermour Way Knoxville, TN 37912 cynthialawson@bbllawgroup.com	Attorney Fees			2020	\$1,350.00	
17.	Within 1 year before you filed for bankruptor promised to help you deal with your credited Do not include any payment or transfer that you	ors or to make paymen			r transfer any prop	erty to anyone who	
	<ul><li>■ No</li><li>□ Yes. Fill in the details.</li></ul>						
	Person Who Was Paid Address	Description and transferred	value of any prope	rty	Date payment or transfer was made	Amount of payment	
18.	Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs?  Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement.  No  Yes. Fill in the details.						
	Person Who Received Transfer Address		property transferred payme		any property or received or debts change	Date transfer was made	
	Person's relationship to you			•	•		
	Uncle	Sold a 1996 Cl	nevy Silverado	\$1,800.00	)	11/2018	
19.	Within 10 years before you filed for bankrup beneficiary? (These are often called asset-pr ■ No □ Yes. Fill in the details.		ny property to a se	lf-settled tru	st or similar device	e of which you are a	
	Name of trust Description and value of the property transferr				ed	Date Transfer was made	
Pai	t 8: List of Certain Financial Accounts, In	nstruments, Safe Depos	it Boxes, and Stora	ge Units			
20.	Within 1 year before you filed for bankrupto sold, moved, or transferred? Include checking, savings, money market, houses, pension funds, cooperatives, asso	or other financial accor	unts; certificates of			,	
	Yes. Fill in the details.		_				
	Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)	Last 4 digits of account number	Type of account instrument	clo mo	te account was sed, sold, ved, or osferred	Last balance before closing or transfer	

Debtor 1 Sean Michael Goodman
Debtor 2 Nicole Marie Goodman

21.	Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables?					
	■ No					
	Yes. Fill in the details.					
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had access to it? Address (Number, Street, City, State and ZIP Code)	Describe the contents	Do you still have it?		
22.	Have you stored property in a storage unit or p	place other than your home within 1	year before you filed for bankruptcy	?		
	□ No					
	Yes. Fill in the details.					
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or had access to it? Address (Number, Street, City, State and ZIP Code)	Describe the contents	Do you still have it?		
	Metro Self Storage 4318 Middlebrook Pike Knoxville, TN 37921	debtors	pictures, craft items, books, dvds, christmas decor, tools	□ No ■ Yes		
Par	9: Identify Property You Hold or Control for	Someone Else				
23.	Do you hold or control any property that some for someone.	one else owns? Include any proper	ry you borrowed from, are storing fo	r, or hold in trust		
	■ No □ Yes. Fill in the details.					
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the property? (Number, Street, City, State and ZIP Code)	Describe the property	Value		
Par	10: Give Details About Environmental Inform	nation				
For t	he purpose of Part 10, the following definitions	apply:				
	Environmental law means any federal, state, or toxic substances, wastes, or material into the a regulations controlling the cleanup of these su	air, land, soil, surface water, ground	<del>-</del> -			
	Site means any location, facility, or property as to own, operate, or utilize it, including disposal	-	aw, whether you now own, operate,	or utilize it or used		
	<i>Hazardous material</i> means anything an enviror hazardous material, pollutant, contaminant, or		waste, hazardous substance, toxic	substance,		
Repo	ort all notices, releases, and proceedings that y	ou know about, regardless of when	they occurred.			
24.	Has any governmental unit notified you that yo	u may be liable or potentially liable	under or in violation of an environm	ental law?		
	■ No □ Yes. Fill in the details.					
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice		
25.	Have you notified any governmental unit of any	y release of hazardous material?				
	■ No □ Yes. Fill in the details.					
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice		

Debtor 1 Sean Michael Goodman
Debtor 2 Nicole Marie Goodman

26.	Hav	e you been a party in any judicial or adm	ninistrative proceeding under any envi	ronm	ental law? Include settlements a	and orders.		
		No						
	ш	Yes. Fill in the details.						
		se Title se Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Natu	ure of the case	Status of the case		
Par	t 11:	Give Details About Your Business or (	Connections to Any Business					
27.	With	hin 4 years before you filed for bankrupt	cy, did you own a business or have an	y of t	the following connections to any	/ business?		
		☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time						
	☐ A member of a limited liability company (LLC) or limited liability partnership (LLP)							
	☐ A partner in a partnership							
	☐ An officer, director, or managing executive of a corporation							
	☐ An owner of at least 5% of the voting or equity securities of a corporation							
	No. None of the above applies. Go to Part 12.							
		Yes. Check all that apply above and fill	in the details below for each business	i.				
		siness Name dress	Describe the nature of the business		Employer Identification number Do not include Social Security			
		mber, Street, City, State and ZIP Code)	Name of accountant or bookkeeper		Dates business existed			
28.		hin 2 years before you filed for bankrupto itutions, creditors, or other parties.	cy, did you give a financial statement t	o any	yone about your business? Inclu	ide all financial		
		No Yes. Fill in the details below.						
		me dress mber, Street, City, State and ZIP Code)	Date Issued					

Debtor 1	Sean Michael Goodma	n	i dige _c c. cc
Debtor 2	Nicole Marie Goodman	1	Case number (if known)
Part 12:	Sign Below		
I have rea	d the answers on this State	ement of Financial Affairs ar	nd any attachments, and I declare under penalty of perjury that the answers
are true a	nd correct. I understand tha	nt making a false statement	, concealing property, or obtaining money or property by fraud in connection
			prisonment for up to 20 years, or both.
18 U.S.C.	§§ 152, 1341, 1519, and 357	1.	
/s/ Sean	Michael Goodman	/s/ Nic	cole Marie Goodman
Sean Mi	ichael Goodman	Nicole	e Marie Goodman
Signatur	e of Debtor 1	Signat	ture of Debtor 2
Date F	ebruary 6, 2020	Date	February 6, 2020
Did you a	ttach additional pages to Yo	our Statement of Financial	Affairs for Individuals Filing for Bankruptcy (Official Form 107)?
■ No			
☐ Yes			
Did you p	ay or agree to pay someone	who is not an attorney to I	help you fill out bankruptcy forms?
■ No			
Π γ <sub>es</sub> Ν	ame of Person Attack	the Rankruntcy Petition Pres	narer's Notice Declaration and Signature (Official Form 119)

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		Mail Ducu	IIIEIII - EAUE TO OLO	30	
Fill in this infor	mation to identify your	case:			
Debtor 1	Sean Michael Go	odman			
	First Name	Middle Name	Last Name		
Debtor 2	Nicole Marie Goo	dman			
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	EASTERN DISTRICT O	DF TENNESSEE		
Case number					
(if known)					☐ Check if this is an amended filing

# Official Form 106Sum

## **Summary of Your Assets and Liabilities and Certain Statistical Information**

12/13

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

		Your a	ssets of what you own
1.	Schedule A/B: Property (Official Form 106A/B)  1a. Copy line 55, Total real estate, from Schedule A/B	\$	0.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	17,132.32
	1c. Copy line 63, Total of all property on Schedule A/B	\$	17,132.32
Par	t 2: Summarize Your Liabilities		
			abilities It you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)  2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	16,567.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F)  3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	6,655.18
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	135,137.62
	Your total liabilities	\$	158,359.80
Par	t 3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	3,531.79
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	3,471.00
Par	t 4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13?  No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	ır other sch	hedules.
	■ Yes		

Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

Debtor 1 Sean Michael Goodman
Debtor 2 Nicole Marie Goodman

Case

Case number (if known)

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

2,253.16

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Tota	al claim
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$_	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$_	6,655.18
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$_	0.00
9d. Student loans. (Copy line 6f.)	\$_	82,896.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$_	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$_	0.00
9g. <b>Total.</b> Add lines 9a through 9f.	\$	89,551.18

	Ous	0.20 BK 00000 O	Main Document Page 18 of 6	n 02/01/20 10:00:0	<b>50 B</b> 050
Fill in	this info	rmation to identify your cas			
Debto	or 1	Sean Michael Good	man		
Debie	'1 1	First Name	Middle Name Last Name		
Debto	r 2	Nicole Marie Goodn	nan		
(Spouse	e, if filing)	First Name	Middle Name Last Name		
United	d States E	Bankruptcy Court for the: EA	ASTERN DISTRICT OF TENNESSEE		
_		_			
Case	number				☐ Check if this is an
					amended filing
Offi	<u>cial F</u>	orm 106A/B			
Scl	าedu	le A/B: Prope	rtv		12/15
			ems. List an asset only once. If an asset fits in more than o	one category, list the asset in	the category where you
hink it	fits best.	Be as complete and accurate a	is possible. If two married people are filing together, both a	re equally responsible for su	pplying correct
	r every que		eparate sheet to this form. On the top of any additional pag	es, write your name and case	number (ii known).
Dort 1	Dogorib	a Each Daoidenae Building Le	and or Other Book Estate You Own or Hove an Interest In		
Part 1	Describ	e Each Residence, Building, La	and, or Other Real Estate You Own or Have an Interest In		
. Do y	ou own o	r have any legal or equitable in	terest in any residence, building, land, or similar property?		
	lo. Go to P	ort 2			
_					
ЦΥ	es. where	e is the property?			
Part 2	Describ	e Your Vehicles			
			ble interest in any vehicles, whether they are registeralso report it on Schedule G: Executory Contracts and L		hicles you own that
onnec	ile eise u	rives. Il you lease a verilcie, a	also report it on scriedule G. Executory Contracts and C	техрпеи Leases.	
. Car	s, vans, t	trucks, tractors, sport utility	y vehicles, motorcycles		
	Jo				
	'es				
0.4		Volkswagon	William Control of the Control of th	Do not deduct secured cla	aims or exemptions. Put
3.1	Make:	Passat	Who has an interest in the property? Check one	the amount of any secure	d claims on Schedule D:
	Model:		☐ Debtor 1 only	Creditors Who Have Clair	ns Secured by Property.
	Year:	2007 ate mileage: 14334	Debtor 2 only	Current value of the	Current value of the
				entire property?	portion you own?
1	Other info		☐ At least one of the debtors and another		
	Tag # B	/VWJK73C47P120639	☐ Check if this is community property	\$1,500.00	\$1,500.00
	VIIV # V	7777011700471 120003	(see instructions)		
3.2	Make:	Chevy	Who has an interest in the property? Check one	Do not deduct secured cla the amount of any secure	
	Model:	Equinox	☐ Debtor 1 only	Creditors Who Have Clair	
	Year:	2011	☐ Debtor 2 only	Current value of the	Current value of the
	Approxim	ate mileage: 15128	Debtor 1 and Debtor 2 only	entire property?	portion you own?
	Other info		At least one of the debtors and another	· ·	-
	Tag # 8	J4-3P2		<b>*</b> • • • • •	<b>.</b>
	_	GNALBEC0B1246491	☐ Check if this is community property	\$1,320.00	\$1,320.00
			(see instructions)		

Official Form 106A/B Schedule A/B: Property page 1

Debtor		ok-30380-SHB	Doc 1 Filed 02/07/20 Entered Main Document Page 19 of 60		9:35 Desc
Debtor			Cas	e number (if known)	
	Make: Harley Da  Model: FXDL  Year: 2015  Approximate mileage: Other information:	9703	Who has an interest in the property? Check one  Debtor 1 only  Debtor 2 only  Debtor 1 and Debtor 2 only	the amount of any sec	d claims or exemptions. Put cured claims on Schedule D: Claims Secured by Property.  Current value of the portion you own?
7	Tag # 177-ZN3 VIN # 1HD1GNM1	4FC322873	☐ At least one of the debtors and another ☐ Check if this is community property (see instructions)	\$8,845.00	\$8,845.00
Exam  No □ Ye  5 Add	nples: Boats, trailers, o es I the dollar value of	motors, personal water	I other recreational vehicles, other vehicles, and ercraft, fishing vessels, snowmobiles, motorcycle action of your entries from Part 2, including any	cessories entries for	\$11,665.00
.pag	es you have attache	ed for Part 2. Write th	nat number here	=>	\$11,003.00
Part 3:	Describe Your Perso	nal and Household Iter	ns		
Do you	u own or have any l	egal or equitable inte	erest in any of the following items?		Current value of the portion you own? Do not deduct secured claims or exemptions.
□ N ■ Y	lo ′es. Describe	Cleaner, Lawn M	n, Washer/Dryer, Microwave, Refrigerator, \ ower, Weed Eater, Exercise Equipment, BR tove, Kitchen Utensils, Dish Washer, Tools	R Furn,	\$1,000.00
Exa.	including cell	phones, cameras, me	, DVD Player, Computer, Digital Camera, St		ections; electronic devices
Exa	other collection	figurines; paintings, p ons, memorabilia, coll	rints, or other artwork; books, pictures, or other art c ectibles	bjects; stamp, coin, or	baseball card collections;
Exa ■ N	musical instru	graphic, exercise, and	l other hobby equipment; bicycles, pool tables, golf o	clubs, skis; canoes and	kayaks; carpentry tools;
10. <b>Fire</b> <i>Ex</i> □ N	amples: Pistols, rifles	s, shotguns, ammuniti	on, and related equipment		
<b>■</b> Y	es. Describe Form 106A/B		Schedule A/B: Property		page

Debtor 1 Debtor 2	Sean Michael Goodn Nicole Marie Goodm			Case number (if kno	wn)
	4 hand	guns, 2 shot gur	ns		\$500.00
☐ No		, leather coats, desiç	gner wear, shoes, accessories	3	
	Clothir	ıg			\$250.00
☐ No	ples: Everyday jewelry, cosi . Describe			eirloom jewelry, watches, gen	ns, gold, silver
	Watch,	Necklaces, Ring	s, Costume Jewelry		\$500.00
<i>Exam</i> □ No	arm animals oples: Dogs, cats, birds, hors Describe	es			
	2 Cats,	2 Dogs, 3 Rats, 8	3 Snakes		\$30.00
15. <b>Add</b>		our entries from Pa	rt 3, including any entries f	or pages you have attached 	\$2,980.00
Part 4: De	escribe Your Financial Assets				
Do you o	wn or have any legal or eq	uitable interest in a	any of the following?		Current value of the portion you own? Do not deduct secured claims or exemptions.
■ No	oples: Money you have in yo			on hand when you file your p	etition
			unts; certificates of deposit; sh with the same institution, list e	nares in credit unions, brokera ach.	ge houses, and other similar
			Institution name:		
	17.1.	Checking & Savings	ORNL FCU		\$530.90
	s, mutual funds, or publicl pples: Bond funds, investmen		kerage firms, money market a	ccounts	

☐ Yes...... Institution or issuer name:

Case 3:20-bk-30380-SHB Doc 1 Filed 02/07/20 Entered 02/07/20 15:09:35 Main Document Page 21 of 60 Debtor 1 Sean Michael Goodman Debtor 2 **Nicole Marie Goodman** Case number (if known) 19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture No ☐ Yes. Give specific information about them..... Name of entity: % of ownership: 20. Government and corporate bonds and other negotiable and non-negotiable instruments Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them. ☐ Yes. Give specific information about them Issuer name: 21. Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans ☐ Yes. List each account separately. Type of account: Institution name: 22. Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others No Institution name or individual: ☐ Yes. ..... 23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years) ■ No Issuer name and description. ☐ Yes..... 24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1). ■ No ☐ Yes..... Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c): 25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit ☐ Yes. Give specific information about them... 26. Patents, copyrights, trademarks, trade secrets, and other intellectual property Examples: Internet domain names, websites, proceeds from royalties and licensing agreements No ☐ Yes. Give specific information about them...

'

27. Licenses, franchises, and other general intangibles

Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses

No

☐ Yes. Give specific information about them...

Money or property owed to you?

Current value of the portion you own?

Do not deduct secured

claims or exemptions.

28. Tax refunds owed to you ☐ No

■ Yes. Give specific information about them, including whether you already filed the returns and the tax years......

Anticipated 2019 Income Tax Refund Federal Unknown

Official Form 106A/B Schedule A/B: Property page 4

<b>5</b> 1 /	4 Ocean Michael Consideration	Main Document	Page 22 of 60	
Debtor Debtor			Case number (if known)	
Ex ■ N	, . No	nony, spousal support, child support, r	maintenance, divorce settlement, property	settlement
	es. Give specific information			
Ex ■ N	benefits; unpaid loans you lo	nsurance payments, disability benefits	, sick pay, vacation pay, workers' comper	sation, Social Security
	es. Give specific information			
		surance; health savings account (HSA	x); credit, homeowner's, or renter's insuran	ce
<b>■</b> Y	es. Name the insurance company Compar	of each policy and list its value.  ny name:	Beneficiary:	Surrender or refund value:
	Term L	ife via employer (no cash value	<u> </u>	\$0.00
If y so ■ N	ou are the beneficiary of a living tr meone has died.	you from someone who has died ust, expect proceeds from a life insura	ance policy, or are currently entitled to rece	ive property because
Ex ■ N □ Y 34. Oth	camples: Accidents, employment di No Yes. Describe each claim	er or not you have filed a lawsuit or sputes, insurance claims, or rights to so claims of every nature, including co		set off claims
	os. Bosonibo caon diamin	Involuntary Preferential trans		\$1,456.42
	y financial assets you did not alr lo 'es. Give specific information	ready list		
		entries from Part 4, including any e		\$1,987.32
Part 5:	Describe Any Business-Related Pro	operty You Own or Have an Interest In. L	ist any real estate in Part 1.	
	you own or have any legal or equitab o. Go to Part 6.	le interest in any business-related prope	rty?	
■ Ye	es. Go to line 38.			
				Current value of the portion you own? Do not deduct secured claims or exemptions.
	counts receivable or commission No Yes. Describe	ns you already earned		
	Form 106A/B	Schedule A/B: Prop	erty	page
			<del>-</del>	1 3 -

Debtor 1 Debtor 2	Sean Michael Goodman Nicole Marie Goodman	Case number (if known)	
Exam <sub>i</sub> ■ No	equipment, furnishings, and supplies  ples: Business-related computers, software, modems, printers, cop  Describe	oiers, fax machines, rugs, telephones, desks,	chairs, electronic devices
□ No	nery, fixtures, equipment, supplies you use in business, and to	ools of your trade	
	Tools		\$500.00
41. <b>Invent</b> ■ No □ Yes.	Describe		
■ No	sts in partnerships or joint ventures  . Give specific information about them  Name of entity:	% of ownership:	
No.	mer lists, mailing lists, or other compilations our lists include personally identifiable information (as defined in 11 U.S	.C. § 101(41A))?	
	■ No □ Yes. Describe		
■ No	usiness-related property you did not already list  Give specific information		
	the dollar value of all of your entries from Part 5, including any Part 5. Write that number here		\$500.00
	escribe Any Farm- and Commercial Fishing-Related Property You Own you own or have an interest in farmland, list it in Part 1.	or Have an Interest In.	
	u own or have any legal or equitable interest in any farm- or co	ommercial fishing-related property?	
☐ Yes	s. Go to line 47.		
Part 7:	Describe All Property You Own or Have an Interest in That You Did	Not List Ahove	

Official Form 106A/B Schedule A/B: Property page 6

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	0	Main Document	Page 24 of 60	
Debtor 1 Debtor 2			Case number (if known)	
Exa. □ No	ou have other property of any mples: Season tickets, country cl	ub membership		
	debtor used a represo of the l	's best estimate as to the amo nd "as is", to a willing buyer. ent the replacement value, act	ems in Schedule B represent the bunt the items could be sold for, None of the values are intended to tual cash value or any other value debtor's homeowner's insurance	\$0.0
54. <b>Ad</b>	d the dollar value of all of your	entries from Part 7. Write that nui	mber here	\$0.00
Part 8:	List the Totals of Each Part of the	nis Form		
55. <b>Pa</b> r	rt 1: Total real estate, line 2			\$0.00
56. <b>Par</b>	rt 2: Total vehicles, line 5		\$11,665.00	
57. <b>Par</b>	rt 3: Total personal and househ	old items, line 15	\$2.980.00	

\$1,987.32

\$17,132.32

\$500.00

\$0.00

\$0.00

Copy personal property total

63. Total of all property on Schedule A/B. Add line 55 + line 62

Part 6: Total farm- and fishing-related property, line 52

58. Part 4: Total financial assets, line 36

59. Part 5: Total business-related property, line 45

Part 7: Total other property not listed, line 54

62. Total personal property. Add lines 56 through 61...

\$17,132.32

\$17,132.32

Official Form 106A/B Schedule A/B: Property page 7

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		IVICALL LOCAL	HCH LAAC ZO O	00
Fill in this infor	mation to identify your	case:		
Debtor 1	Sean Michael Go	odman		
	First Name	Middle Name	Last Name	
Debtor 2	Nicole Marie Goo	dman		
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	EASTERN DISTRICT O	F TENNESSEE	
Case number				
(if known)				

# Official Form 106C

# Schedule C: The Property You Claim as Exempt

4/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on Schedule A/B: Property (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of Part 2: Additional Page as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1:	Identify	the Property	y You Claim as Exempt	

Pa	rt 1: Identify the Property You Claim as E	xempt			
1.	Which set of exemptions are you claiming	? Check one only, eve	n if yo	our spouse is filing with you.	
	☐ You are claiming state and federal nonban	kruptcy exemptions.	11 U.S	S.C. § 522(b)(3)	
	■ You are claiming federal exemptions. 11 t	J.S.C. § 522(b)(2)			
2.	For any property you list on Schedule A/B	that you claim as exe	mpt,	fill in the information below.	
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption
		Copy the value from Schedule A/B	Che	eck only one box for each exemption.	
	2007 Volkswagon Passat 143347	\$1,500.00		\$1,500.00	11 U.S.C. § 522(d)(2)
	miles Tag # BSY-373 VIN # WVWJK73C47P120639 Line from Schedule A/B: 3.1			100% of fair market value, up to any applicable statutory limit	
	2011 Chevy Equinox 151282 miles	\$1,320.00		\$1,320.00	11 U.S.C. § 522(d)(2)
	Tag # 8J4-3P2 VIN # 2GNALBEC0B1246491 Line from Schedule A/B: 3.2			100% of fair market value, up to any applicable statutory limit	
	LR Furn, DR Furn, Washer/Dryer, Microwave, Refrigerator, Vacuum	\$1,000.00		\$1,000.00	11 U.S.C. § 522(d)(3)
	Cleaner, Lawn Mower, Weed Eater, Exercise Equipment, BR Furn, Kitchen Table, Stove, Kitchen Utensils, Dish Washer, Tools, Garden Tools Line from Schedule A/B: 6.1			100% of fair market value, up to any applicable statutory limit	

\$700.00

Cell Phone, TV's, DVD Player,

Line from Schedule A/B: 7.1

Computer, Digital Camera, Stereo, **Video Systems and Games** 

11 U.S.C. § 522(d)(3)

\$700.00

100% of fair market value, up to

any applicable statutory limit

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Debto Debto				Case number (if known)	
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption
		Copy the value from Schedule A/B	Che	eck only one box for each exemption.	
	hand guns, 2 shot guns ine from Schedule A/B: 10.1	\$500.00		\$500.00	11 U.S.C. § 522(d)(5)
				100% of fair market value, up to any applicable statutory limit	
	Clothing Line from Schedule A/B: 11.1	\$250.00		\$250.00	11 U.S.C. § 522(d)(5)
_	ane nom <i>Suredule A.D.</i> TTT			100% of fair market value, up to any applicable statutory limit	
	Watch, Necklaces, Rings, Costume Jewelry	\$500.00		\$500.00	11 U.S.C. § 522(d)(4)
	Line from Schedule A/B: 12.1			100% of fair market value, up to any applicable statutory limit	
	2 Cats, 2 Dogs, 3 Rats, 8 Snakes Line from Schedule A/B: 13.1	\$30.00		\$30.00	11 U.S.C. § 522(d)(5)
-	and from Garedate A.B. 10.1			100% of fair market value, up to any applicable statutory limit	
	Checking & Savings: ORNL FCU	\$530.90		\$530.90	11 U.S.C. § 522(d)(5)
-	and from Garedate A.B. IIII			100% of fair market value, up to any applicable statutory limit	
	Federal: Anticipated 2019 Income	Unknown		\$8,000.00	11 U.S.C. § 522(d)(5)
_	ine from Schedule A/B: 28.1			100% of fair market value, up to any applicable statutory limit	
	nvoluntary Preferential transfer via wage garnishment premier members	\$1,456.42		\$1,456.42	11 U.S.C. § 522(d)(5)
C	credit union Line from Schedule A/B: 34.1			100% of fair market value, up to any applicable statutory limit	
	Are you claiming a homestead exemption Subject to adjustment on 4/01/22 and every			led on or after the date of adjustmen	ıt.)
	<ul><li>No</li><li>Yes. Did you acquire the property cover</li></ul>	ed by the exemption wi	thin 1	,215 days before you filed this case?	?
	□ No				
	1 1 VOC				

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Case	3.20-DK-30300	Main Document Page	27 of 60	1120 13.09.33	Desc
Fill in this informa	ation to identify you		27 01 00		
Debtor 1	Sean Michael G				
Debior	First Name	Middle Name Last Name		-	
Debtor 2	Nicole Marie Go	oodman			
(Spouse if, filing)	First Name	Middle Name Last Name		-	
United States Bank	kruptcy Court for the	EASTERN DISTRICT OF TENNESSEE		_	
Case number					
(if known)				_	if this is an
				ameno	led filing
Official Form	106D				
		Who Have Claims Secured	hy Propert	V	12/15
	J. Creditors	Willo Have Claims Secured	a by Propert	<u>y                                    </u>	12/13
		If two married people are filing together, both are equout, number the entries, and attach it to this form. Or			
•	ave claims secured by	y your property?			
☐ No. Check t	this box and submit t	his form to the court with your other schedules. Yo	ou have nothing else t	to report on this form.	
_	all of the information	·	3	·	
		bolow.			
•	Secured Claims		Column A	Column B	Column C
		more than one secured claim, list the creditor separately a particular claim, list the other creditors in Part 2. As	Amount of claim	Value of collateral	Unsecured
much as possible, list	t the claims in alphabeti	cal order according to the creditor's name.	Do not deduct the	that supports this claim	portion
2.1 Esb/harley	Davidson Cr	Describe the property that secures the claim:	value of collateral. \$10,831.00	\$8,845.00	If any <b>\$1,986.00</b>
Creditor's Name		2015 Harley Davidson FXDL 9703	<u> </u>	Ψο,ο 10100	
		miles			
		Tag # 177-ZN3			
		VIN # 1HD1GNM14FC322873			
3850 Arrow	head Drive	As of the date you file, the claim is: Check all that apply.			
Carson Cit	y, NV 89706	Contingent			
Number, Street, C	City, State & Zip Code	☐ Unliquidated			
		☐ Disputed			
Who owes the deb	t? Check one.	Nature of lien. Check all that apply.			
Debtor 1 only		☐ An agreement you made (such as mortgage or sec	ured		
Debtor 2 only		car loan)			
■ Debtor 1 and Deb	otor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)			
☐ At least one of the	e debtors and another	☐ Judgment lien from a lawsuit			
Check if this clai		Other (including a right to offset)			
	Opened				

Last 4 digits of account number

6887

09/15 Last Active

Date debt was incurred 11/21/19

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Debtor 1	Sean Mich	ael Goodmar	1			Case number (if known)		
	First Name	Middle N	lame	Last Name				
Debtor 2	Nicole Ma	rie Goodman						
	First Name	Middle N	lame	Last Name	_			
						**		
	ap-on Credi	t LIC	1	e property that secures	the claim:	\$5,736.00	\$500.00	\$5,236.00
Cred	litor's Name		Tools					
054	) Tackmala		As of the da	ate you file, the claim is:	Check all that	J		
	) Technolog		apply.					
	ertyville, IL		Continge					
Num	ber, Street, City, S	state & Zip Code	Unliquida	ated				
			□ Disputed					
Who owe	es the debt? C	heck one.	Nature of I	ien. Check all that apply.				
Debtor	1 only		☐ An agree	ement you made (such as	mortgage or	secured		
☐ Debtor	2 only		car loan	)				
☐ Debtor	· 1 and Debtor 2	only	☐ Statutory	lien (such as tax lien, me	echanic's lien)			
☐ At leas	t one of the deb	tors and another	☐ Judgmer	nt lien from a lawsuit				
	if this claim re	elates to a	Other (in	cluding a right to offset)	Purchas	e Money Security Interest		
Date debt	was incurred	Opened 12/16 Last Active 3/27/18	Last	4 digits of account num	nber 724	7		
Add the	dollar value o	f your entries in (	Column A on t	his page. Write that nun	nber here:	\$16,567.00		
	the last page at number her		the dollar val	ue totals from all pages	-	\$16,567.00		

### Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

		Main Document P	age 29	of 60		
Fill in this in	formation to identify your case:					
Debtor 1	Sean Michael Goodman					
			ne			
Debtor 2	Nicole Marie Goodman					
Debtor 2 Spouse if, filing)  United States Bankruptcy Court Case number f known)  Official Form 106E/F Schedule E/F: Credit as complete and accurate as porchedule G: Executory Contracts or unexpiratedule D: Creditors Who Have Cft. Attach the Continuation Page (ame and case number (if known).	First Name	Middle Name Last Nar	ne			
United States	Nicole Marie Goodman First Name Middle Name Last Name  tates Bankruptcy Court for the: EASTERN DISTRICT OF TENNESSEE  mber  I Form 106E/F  Sule E/F: Creditors Who Have Unsecured Claims  splete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NOI tory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: G: Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially D: Creditors Who Have Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, the Continuation Page to this page. If you have no information to report in a Part, do not file that Part. On the case number (if known).  List All of Your PRIORITY Unsecured Claims by creditors have priority unsecured claims against you?  D. Go to Part 2.					
Case number						
(if known)					☐ Check	if this is an
					amend	ed filing
O#:-:-1 F:	400E/E					
						4044
						12/15
Schedule D: Cr eft. Attach the	editors Who Have Claims Secured by Continuation Page to this page. If you	Property. If more space is needed, o	opy the Par	t you need, fill it out,	number the entries in	the boxes on the
Part 1: Lis	st All of Your PRIORITY Unsecure	d Claims				
1. Do any cre	editors have priority unsecured claims	against you?				
☐ No. Go	to Part 2.					
Yes.						
identify what possible, lis	at type of claim it is. If a claim has both p st the claims in alphabetical order accord	riority and nonpriority amounts, list that ing to the creditor's name. If you have	claim here a	and show both priority a	nd nonpriority amoun	s. As much as
(For an exp	planation of each type of claim, see the in	structions for this form in the instruction	n booklet.)	Total claim	Priority amount	Nonpriority amount
2.1 Inter	nal Revenue Service	Last 4 digits of account number	r CP14	\$2,274.95	\$2,274.95	\$0.00
	y Creditor's Name					
	ralized Insolvency Operation Box 7346	When was the debt incurred?			-	
	adelphia, PA 19101-7346					
	er Street City State Zip Code	As of the date you file, the clair	n is: Check	all that apply		
Who incu	urred the debt? Check one.	☐ Contingent				
☐ Debto	r 1 only	☐ Unliquidated				
☐ Debto	r 2 only	Disputed				
■ Debto	r 1 and Debtor 2 only	Type of PRIORITY unsecured c	laim:			
_	st one of the debtors and another	Domestic support obligations				
_	k if this claim is for a community debt	■ Taxes and certain other debts	vou owe the	e government		
	im subject to offset?	☐ Claims for death or personal i	•	•		
■ No		Other. Specify	, , y			
☐ Yes		Notice Pu	rpose Or	nly		

tor 2 Nicole Marie Goodman		Case nur	nber (if known)		
Internal Revenue Service	Last 4 digits of account number	P21A	\$4,380.23	\$4,380.23	\$0.0
Priority Creditor's Name Centralized Insolvency Operation P.O. Box 7346	When was the debt incurred?			· /	• •
Philadelphia, PA 19101-7346					
Number Street City State Zip Code	As of the date you file, the claim	is: Check all t	hat apply		
Who incurred the debt? Check one.	☐ Contingent				
☐ Debtor 1 only	☐ Unliquidated				
Debtor 2 only	☐ Disputed				
■ Debtor 1 and Debtor 2 only	Type of PRIORITY unsecured cla	im:			
☐ At least one of the debtors and another	☐ Domestic support obligations				
☐ Check if this claim is for a community debt	■ Taxes and certain other debts y	ou owe the go	overnment		
s the claim subject to offset?	Claims for death or personal inj	ury while you	were intoxicated		
■ No	☐ Other. Specify				
☐ Yes	Notice Pur	pose Only			
Oo any creditors have nonpriority unsecured claim  No. You have nothing to report in this part. Submit	ns against you?	schedules.			
Do any creditors have nonpriority unsecured claim  No. You have nothing to report in this part. Submit  Yes.  List all of your nonpriority unsecured claims in the insecured claim, list the creditor separately for each chan one creditor holds a particular claim, list the other	this form to the court with your other sealphabetical order of the creditor laim. For each claim listed, identify wh	who holds ea nat type of clai	m it is. Do not list claims	s already included in Pa	rt 1. If more
o any creditors have nonpriority unsecured claim  No. You have nothing to report in this part. Submit  Yes.  ist all of your nonpriority unsecured claims in the nsecured claim, list the creditor separately for each claim one creditor holds a particular claim, list the other	this form to the court with your other sealphabetical order of the creditor laim. For each claim listed, identify wh	who holds ea nat type of clai	m it is. Do not list claims	s already included in Pa	rt 1. If more on Page of
o any creditors have nonpriority unsecured claim  No. You have nothing to report in this part. Submit  Yes.  ist all of your nonpriority unsecured claims in the asecured claim, list the creditor separately for each can one creditor holds a particular claim, list the other art 2.  Allegiance	this form to the court with your other sealphabetical order of the creditor laim. For each claim listed, identify wh	who holds ea nat type of clai han three non	m it is. Do not list claims	s already included in Pa s fill out the Continuation	rt 1. If more on Page of im
o any creditors have nonpriority unsecured claim  No. You have nothing to report in this part. Submit  Yes.  st all of your nonpriority unsecured claims in the secured claim, list the creditor separately for each can one creditor holds a particular claim, list the other art 2.  Allegiance  Nonpriority Creditor's Name	this form to the court with your other sealphabetical order of the creditor laim. For each claim listed, identify who creditors in Part 3.If you have more to	who holds ea nat type of clai han three non	m it is. Do not list claims	s already included in Pa s fill out the Continuation	rt 1. If more on Page of im
o any creditors have nonpriority unsecured claim  No. You have nothing to report in this part. Submit  Yes.  st all of your nonpriority unsecured claims in the secured claim, list the creditor separately for each can one creditor holds a particular claim, list the other art 2.  Allegiance  Nonpriority Creditor's Name  POB 3018	this form to the court with your other sealphabetical order of the creditor laim. For each claim listed, identify who creditors in Part 3.If you have more to	who holds ea nat type of clai han three non	m it is. Do not list claims	s already included in Pa s fill out the Continuation	rt 1. If more on Page of im
o any creditors have nonpriority unsecured claim  No. You have nothing to report in this part. Submit  Yes.  Ist all of your nonpriority unsecured claims in the an one creditor holds a particular claim, list the other art 2.  Allegiance  Nonpriority Creditor's Name	this form to the court with your other sealphabetical order of the creditor laim. For each claim listed, identify who creditors in Part 3.If you have more to Last 4 digits of account numbers.	who holds ea nat type of clai han three non er 1005	m it is. Do not list claims priority unsecured claim	s already included in Pa s fill out the Continuation	rt 1. If more on Page of im
o any creditors have nonpriority unsecured claim  No. You have nothing to report in this part. Submit  Yes.  ist all of your nonpriority unsecured claims in the necured claim, list the creditor separately for each claim one creditor holds a particular claim, list the other art 2.  Allegiance  Nonpriority Creditor's Name  POB 3018  Missoula, MT 59806	this form to the court with your other sealphabetical order of the creditor laim. For each claim listed, identify who creditors in Part 3.If you have more to the Last 4 digits of account numb	who holds ea nat type of clai han three non er 1005	m it is. Do not list claims priority unsecured claim	s already included in Pa s fill out the Continuation	rt 1. If more on Page of
o any creditors have nonpriority unsecured claim  No. You have nothing to report in this part. Submit  Yes.  ist all of your nonpriority unsecured claims in the nescured claim, list the creditor separately for each claim one creditor holds a particular claim, list the other art 2.  Allegiance  Nonpriority Creditor's Name  POB 3018  Missoula, MT 59806  Number Street City State Zip Code	this form to the court with your other sealphabetical order of the creditor laim. For each claim listed, identify who creditors in Part 3.If you have more to the Last 4 digits of account numb	who holds ea nat type of clai han three non er 1005	m it is. Do not list claims priority unsecured claim	s already included in Pa s fill out the Continuation	rt 1. If more on Page of
No. You have nothing to report in this part. Submit Yes.  ist all of your nonpriority unsecured claims in the nescured claim, list the creditor separately for each chan one creditor holds a particular claim, list the other art 2.  Allegiance Nonpriority Creditor's Name POB 3018 Missoula, MT 59806 Number Street City State Zip Code Who incurred the debt? Check one.	this form to the court with your other set alphabetical order of the creditor laim. For each claim listed, identify who creditors in Part 3.If you have more to be also a digits of account numb.  When was the debt incurred?  As of the date you file, the claim.	who holds ea nat type of clai han three non er 1005	m it is. Do not list claims priority unsecured claim	s already included in Pa s fill out the Continuation	rt 1. If more on Page of
No. You have nothing to report in this part. Submit Yes.  ist all of your nonpriority unsecured claims in the nescured claim, list the creditor separately for each chan one creditor holds a particular claim, list the other art 2.  Allegiance  Nonpriority Creditor's Name  POB 3018  Missoula, MT 59806  Number Street City State Zip Code  Who incurred the debt? Check one.	this form to the court with your other sealphabetical order of the creditor laim. For each claim listed, identify who creditors in Part 3.If you have more to the Last 4 digits of account numb  When was the debt incurred?  As of the date you file, the cla	who holds ea nat type of clai han three non er 1005	m it is. Do not list claims priority unsecured claim	s already included in Pa s fill out the Continuation	rt 1. If more on Page of
No. You have nothing to report in this part. Submit  Yes.  ist all of your nonpriority unsecured claims in the nescured claim, list the creditor separately for each chan one creditor holds a particular claim, list the other art 2.  Allegiance  Nonpriority Creditor's Name  POB 3018  Missoula, MT 59806  Number Street City State Zip Code  Who incurred the debt? Check one.  Debtor 1 only  Debtor 2 only	this form to the court with your other set alphabetical order of the creditor value. For each claim listed, identify when creditors in Part 3.If you have more to the Last 4 digits of account numb  When was the debt incurred?  As of the date you file, the cla  Contingent Unliquidated	who holds ean type of claim han three non three non three non three in the interest and the	m it is. Do not list claims priority unsecured claim	s already included in Pa s fill out the Continuation	rt 1. If more on Page of
Allegiance Nonpriority Creditor's Name POB 3018 Missoula, MT 59806 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community	this form to the court with your other set alphabetical order of the creditor value. For each claim listed, identify where creditors in Part 3.If you have more to be also as a count numb.  Last 4 digits of account numb.  When was the debt incurred?  As of the date you file, the cla.  Contingent Unliquidated Disputed Type of NONPRIORITY unsections.	who holds ea nat type of clai han three non er 1005 im is: Check a	m it is. Do not list claims priority unsecured claim	s already included in Pa is fill out the Continuation  Total cla	rt 1. If more on Page of
No. You have nothing to report in this part. Submit  Yes.  ist all of your nonpriority unsecured claims in the nescured claim, list the creditor separately for each chan one creditor holds a particular claim, list the other art 2.  Allegiance Nonpriority Creditor's Name POB 3018 Missoula, MT 59806 Number Street City State Zip Code Who incurred the debt? Check one.  Debtor 1 only Debtor 2 only  At least one of the debtors and another Check if this claim is for a community debt	this form to the court with your other set alphabetical order of the creditor value. For each claim listed, identify who creditors in Part 3.If you have more to be also as a count numb.  Last 4 digits of account numb.  When was the debt incurred?  As of the date you file, the class of	who holds ea nat type of clai han three non er 1005 im is: Check a	m it is. Do not list claims priority unsecured claim	s already included in Pa is fill out the Continuation  Total cla	rt 1. If more on Page of
No. You have nothing to report in this part. Submit  Yes.  ist all of your nonpriority unsecured claims in the nescured claim, list the creditor separately for each chan one creditor holds a particular claim, list the other art 2.  Allegiance Nonpriority Creditor's Name POB 3018 Missoula, MT 59806 Number Street City State Zip Code Who incurred the debt? Check one.  Debtor 1 only Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset?	this form to the court with your other sealphabetical order of the creditor laim. For each claim listed, identify who creditors in Part 3.If you have more to the creditors in Part 3.If you have more to the creditors in Part 3.If you have more to the creditors in Part 3.If you have more to the creditors in Part 3.If you have more to the creditors in Part 3.If you have more to the creditors in Part 3.If you have more to the creditors in Part 4. If you have more to the	who holds ea hat type of clai han three non er 1005 im is: Check a ured claim:	m it is. Do not list claims priority unsecured claim and the claim and t	s already included in Pa is fill out the Continuation  Total cla	rt 1. If more on Page of
Do any creditors have nonpriority unsecured claim  No. You have nothing to report in this part. Submit  Yes.  List all of your nonpriority unsecured claims in the unsecured claim, list the creditor separately for each othan one creditor holds a particular claim, list the other Part 2.  Allegiance  Nonpriority Creditor's Name  POB 3018  Missoula, MT 59806  Number Street City State Zip Code  Who incurred the debt? Check one.  Debtor 1 only  Debtor 2 only  At least one of the debtors and another  Check if this claim is for a community debt	this form to the court with your other set alphabetical order of the creditor value. For each claim listed, identify who creditors in Part 3.If you have more to be also as a count numb.  Last 4 digits of account numb.  When was the debt incurred?  As of the date you file, the class of	who holds ea at type of clai han three non er 1005 im is: Check a ured claim: eparation agreating plans, at	m it is. Do not list claims priority unsecured claims are claims and that apply became or divorce that you do other similar debts	s already included in Pa is fill out the Continuation  Total cla	rt 1. If more on Page of im

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Debtor 1 Sean Michael Goodman Debtor 2 Nicole Marie Goodman Case number (if known) American Coradius International, 0734 4.2 \$119.88 Last 4 digits of account number LLC Nonpriority Creditor's Name When was the debt incurred? Agent For: PayPal, Inc. 2420 Sweet Home Road Suite 150 Buffalo, NY 14228-2244 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ■ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Collection Account ☐ Yes **Aspen Family Care & Aspen** \$0.00 4.3 Last 4 digits of account number Nonpriority Creditor's Name 9331 S Colorado Blvd #200 When was the debt incurred? Littleton, CO 80126 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Debtor 1 only ☐ Contingent Debtor 2 only □ Unliquidated ■ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\hfill\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Other. Specify 4.4 **Bc Services Inc** Last 4 digits of account number 6840 \$112.00 Nonpriority Creditor's Name 550 Disc Dr When was the debt incurred? **Opened 01/19** Longmont, CO 80503 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts **Collection Attorney Centura Castle Rock** 

☐ Yes

■ Other. Specify Adventist

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Debtor 1 Sean Michael Goodman Debtor 2 Nicole Marie Goodman Case number (if known) 4.5 \$604.00 **Biotel Heart** Last 4 digits of account number 5740 Nonpriority Creditor's Name 10255 W Higgins Rd. When was the debt incurred? Des Plaines, IL 60018-5606 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated ■ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community  $\hfill\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes **Medical Services** Other. Specify 4.6 **Budget Control Service** Last 4 digits of account number 2204 \$2,124.00 Nonpriority Creditor's Name 2950 S Jamaica Ct When was the debt incurred? **Opened 04/18** Aurora, CO 80014 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims  $\hfill\square$  Debts to pension or profit-sharing plans, and other similar debts ■ No Collection Attorney Hca - Aurora Denver ☐ Yes Other. Specify Cardiology 4.7 Cabela's/WFB Visa Center Last 4 digits of account number 2637 \$2,508.76 Nonpriority Creditor's Name PO Box 82608 When was the debt incurred? Lincoln, NE 68501-2608 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ■ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims  $\square$  Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Charge Card ☐ Yes

Nicole Marie Goodman		Case number (if known)	
Cavalry Portfolio Serv	Last 4 digits of account number	9803	\$2,571.00
Nonpriority Creditor's Name 500 Summit Lake Drive Valhalla, NY 10595	When was the debt incurred?	Opened 02/18	
Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
Who incurred the debt? Check one.			
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
Check if this claim is for a community	Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
No	Debts to pension or profit-sharing	ng plans, and other similar debts	
□Yes	■ Other. Specify Collection	Attorney Capital One	
Cavalry Portfolio Serv	Last 4 digits of account number	6809	\$865.00
500 Summit Lake Drive Valhalla, NY 10595	When was the debt incurred?	Opened 12/18	
Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
Check if this claim is for a community	Student loans		
lebt s the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
No	Debts to pension or profit-shari	ng plans, and other similar debts	
☐ Yes	■ Other. Specify Collection		
Shau Customa			<b>\$0.00</b>
Chex Systems Ionpriority Creditor's Name	Last 4 digits of account number		\$0.00
Consumer Relations 7805 Hudson Rd Ste 100 Woodbury, MN 55125	When was the debt incurred?		
Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
Who incurred the debt? Check one.			
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecure	ed claim:	
☐ Check if this claim is for a community lebt		aration agreement or divorce that you did not	
s the claim subject to offset?	report as priority claims		
No	Debts to pension or profit-sharing		
Yes	■ Other. Specify Notification	n Purposes Only	

Debtor Debtor	1 Sean Michael Goodman 2 Nicole Marie Goodman	Case number (if known)	
4.1 1	Client Services Inc	Last 4 digits of account number 6669	\$278.00
	Nonpriority Creditor's Name Agent for: Citibank, N.A. 3451 Harry S Truman Blvd Saint Charles, MO 63301-4047	When was the debt incurred?	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	$\square$ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Collection Account	
4.1	Colorado Department of Revenue  Nonpriority Creditor's Name	Last 4 digits of account number 6236	\$1,085.00
	1375 Sherman St. Denver, CO 80203	When was the debt incurred?	
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	☐ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	$\square$ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify taxes	
4.1	Credit Collection Services	Last 4 digits of account number 1996	\$81.41
	Nonpriority Creditor's Name Agent for: American Family	When was the debt incurred?	
	Insurance Com 725 Canton Street Norwood, MA 02062  Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	$\square$ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Collection Account	

Nicole Marie Goodman		Case number (if known)	
Denver Mattress Company	Last 4 digits of account number	5261	\$1,161.7
Nonpriority Creditor's Name 8375 Park Meadows Dr.	When was the debt incurred?		. ,
Lone Tree, CO 80124  Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
Who incurred the debt? Check one.	710 of the date you me, the claim	or check all that apply	
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
■ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharir	g plans, and other similar debts	
□ Yes	Other. Specify Purchase N		
Don't Of Edwardian/nala		0683	¢22.474.0
Dept Of Education/neln Nonpriority Creditor's Name	Last 4 digits of account number	9683	\$33,471.0
Po Box 82561	When was the debt incurred?	Opened 05/16 Last Active 8/08/16	
Lincoln, NE 68501  Number Street City State Zip Code	As of the date you file, the claim	in Chark all that apply	
Who incurred the debt? Check one.	As of the date you file, the claim	s: Спеск ан that аррну	
Debtor 1 only	☐ Contingent		
■ Debtor 2 only	☐ Unliquidated		
_	☐ Disputed		
Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecure	d claim:	
At least one of the debtors and another	■ Student loans		
☐ Check if this claim is for a community lebt sthe claim subject to offset?	☐ Obligations arising out of a sepa	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharir	g plans, and other similar debts	
□ Yes	Other. Specify		
ш тез	Educationa	ıl	
	Last 4 digits of account number	9583	\$24,532.0
Nonpriority Creditor's Name Po Box 82561	Last 4 digits of account number  When was the debt incurred?	9583  Opened 05/16 Last Active 8/08/16	\$24,532.0
Nonpriority Creditor's Name  Po Box 82561  Lincoln, NE 68501  Number Street City State Zip Code	_	Opened 05/16 Last Active 8/08/16	\$24,532.0
Nonpriority Creditor's Name  Po Box 82561  Lincoln, NE 68501  Number Street City State Zip Code  Who incurred the debt? Check one.	When was the debt incurred?  As of the date you file, the claim	Opened 05/16 Last Active 8/08/16	\$24,532.0
Nonpriority Creditor's Name  Po Box 82561  Lincoln, NE 68501  Number Street City State Zip Code  Who incurred the debt? Check one.  Debtor 1 only	When was the debt incurred?  As of the date you file, the claim  Contingent	Opened 05/16 Last Active 8/08/16	\$24,532.0
Nonpriority Creditor's Name  Po Box 82561 Lincoln, NE 68501  Number Street City State Zip Code  Who incurred the debt? Check one.  Debtor 1 only  Debtor 2 only	When was the debt incurred?  As of the date you file, the claim  Contingent  Unliquidated	Opened 05/16 Last Active 8/08/16	\$24,532.0
Nonpriority Creditor's Name  Po Box 82561 Lincoln, NE 68501  Number Street City State Zip Code  Who incurred the debt? Check one.  Debtor 1 only  Debtor 2 only  Debtor 1 and Debtor 2 only	When was the debt incurred?  As of the date you file, the claim  Contingent	Opened 05/16 Last Active 8/08/16 is: Check all that apply	\$24,532.0
Po Box 82561 Lincoln, NE 68501 Number Street City State Zip Code Who incurred the debt? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another	When was the debt incurred?  As of the date you file, the claim  Contingent Unliquidated Disputed Type of NONPRIORITY unsecure	Opened 05/16 Last Active 8/08/16 is: Check all that apply	\$24,532.0
Dept Of Education/neIn Nonpriority Creditor's Name  Po Box 82561 Lincoln, NE 68501 Number Street City State Zip Code Who incurred the debt? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset?	When was the debt incurred?  As of the date you file, the claim  Contingent Unliquidated Disputed Type of NONPRIORITY unsecure Student loans Obligations arising out of a separation.	Opened 05/16 Last Active 8/08/16 is: Check all that apply	\$24,532.0
Po Box 82561 Lincoln, NE 68501 Number Street City State Zip Code Who incurred the debt? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community	When was the debt incurred?  As of the date you file, the claim  Contingent Unliquidated Disputed Type of NONPRIORITY unsecure Student loans	Opened 05/16 Last Active 8/08/16 is: Check all that apply d claim:	\$24,532.0

Nicole Marie Goodman		Case number (if known)	
Dept Of Education/neln	Last 4 digits of account number	8671	\$15,725.
Nonpriority Creditor's Name	_		
Po Box 82561 Lincoln, NE 68501	When was the debt incurred?	Opened 01/16 Last Active 1/02/17	
Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
Who incurred the debt? Check one.			
Debtor 1 only	☐ Contingent		
☐ Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community	Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
No	Debts to pension or profit-sharing	g plans, and other similar debts	
☐ Yes	Other. Specify		
	Educationa	<u></u>	
Dept Of Education/neln	Last 4 digits of account number	8571	\$9,168.
Nonpriority Creditor's Name	_		
Po Box 82561 Lincoln, NE 68501	When was the debt incurred?	Opened 01/16 Last Active 1/02/17	
Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
Who incurred the debt? Check one.			
■ Debtor 1 only	☐ Contingent		
☐ Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community	Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
No	Debts to pension or profit-sharing	g plans, and other similar debts	
☐ Yes	Other. Specify		
	Educationa	ıl	
E-470 Public Highway Authority	Last 4 digits of account number	7648	\$78.
Nonpriority Creditor's Name P.O. Box 5470	When was the debt incurred?		<u> </u>
Denver, CO 80217-5470  Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
■ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt		ration agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims		
No	☐ Debts to pension or profit-sharing		
Yes	Other. Specify Traffic Viol	ation	

Debtor Debtor			Case number (if known)	
4.2	Esb/harley Davidson Cr	Last 4 digits of account number	2343	\$1,254.00
	Nonpriority Creditor's Name  3850 Arrowhead Drive Carson City, NV 89706	When was the debt incurred?	Opened 08/15 Last Active 3/08/19	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	☐ Debtor 1 only ☐ Debtor 2 only	☐ Contingent☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only  At least one of the debtors and another	☐ Disputed  Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	Student loans	aration agreement or divorce that you did not	
	■ No □ Yes	☐ Debts to pension or profit-sharin ☐ Other Specify Automobile		
	□ res	Other. Specify Automobile	<del>-</del>	
4.2	ExpressToll  Nonpriority Creditor's Name	Last 4 digits of account number	2102	\$123.55
	22470 E. Stephen D. Hogan Parkway Suite 110	When was the debt incurred?		
	Aurora, CO 80018  Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	☐ Debtor 1 only ☐ Debtor 2 only	☐ Contingent☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only  □ At least one of the debtors and another	☐ Disputed  Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Student loans ☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No □ Yes	☐ Debts to pension or profit-sharin ☐ Other. Specify Traffic Viol		
			_	
4.2	FBCS, Inc.  Nonpriority Creditor's Name	Last 4 digits of account number	2440	\$685.23
	Agent For: Comcast PO Box 1116	When was the debt incurred?		
	Charlotte, NC 28201  Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	☐ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	Check if this claim is for a community debt		aration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims  Debts to pension or profit-sharir	a plane, and other similar debte	
	■ No □ Yes	Other. Specify     Collection	= -	
	<b>□</b> 1€3	Other. Specify	rooduit	

Debto Debto		J	Case number (if known)	
4.2	I.c. System, Inc	Last 4 digits of account number	9239	\$455.00
	Nonpriority Creditor's Name Po Box 64378 Saint Paul, MN 55164	When was the debt incurred?	Opened 11/18	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	☐ Debtor 1 only	☐ Contingent		
	■ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	report as priority claims	aration agreement or divorce that you did not	
	No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Collection	Attorney Banfield Pet Hospital	
4.2	Matrix Absence Management	Last 4 digits of account number	0686	\$0.00
	Nonpriority Creditor's Name P.O. Box 13498	When was the debt incurred?		
	Philadelphia, PA 19101  Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.	, o o aa.o <b>,</b> oa o, o o.a	or onlook all that apply	
	☐ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
	Yes	Other Specify Notification	n Purposes Only	
4.2	Medicredit, Inc.	Last 4 digits of account number	4707	\$1,859.26
5	Nonpriority Creditor's Name Agent For: The Medical Center	When was the debt incurred?		· · · · · · · · · · · · · · · · · · ·
	Aurora P.O. Box 1629 Maryland Heights, MO 63043-0629 Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.	_		
	Debtor 1 only	Contingent		
	Debtor 2 only	☐ Unliquidated ☐ Disputed		
	Debtor 1 and Debtor 2 only			
	At least one of the debtors and another	Type of NONPRIORITY unsecured  ☐ Student loans	a ciaiin:	
	☐ Check if this claim is for a community debt		aration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	manon agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	□Yes	■ Other. Specify Collection	Account	

Nicole Marie Goodman	Case number (if known)	
MRS BPO, LLC	Last 4 digits of account number 3164	\$97.
Nonpriority Creditor's Name Agent For: Black Hills Colorado Gas Util	When was the debt incurred?	·
1930 Olney Avenue Cherry Hill, NJ 08003 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
☐ Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Contingent	
■ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt s the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
No	$\square$ Debts to pension or profit-sharing plans, and other similar debts	
☐ Yes	Other. Specify Utilities	
Nissan Motor Acceptanc	Last 4 digits of account number 0001	\$16,914.
Nonpriority Creditor's Name	Last 4 digits of account number UUU1	\$10,914.
P.o. Box 660366	Opened 07/16 Last Active	
P.O. BOX 660366 Dallas, TX 75266	When was the debt incurred? 2/02/18	
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
■ Debtor 1 and Debtor 2 only	☐ Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	$\hfill \square$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
No	☐ Debts to pension or profit-sharing plans, and other similar debts	
Yes	Other. Specify Automobile	
Northshore Agency Inc.	Last 4 digits of account number	\$101.
Nonpriority Creditor's Name	When was the debt incurred?	· ·
P. O. Box 9205 Old Bethpage, NY 11804 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
Debtor 1 only	Contingent	
☐ Debtor 2 only	☐ Contingent ☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
_	Student loans	
☐ Check if this claim is for a community debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	
■ No	$\square$ Debts to pension or profit-sharing plans, and other similar debts	
☐ Yes	■ Other. Specify Collection Account	

Debto	Nicole Marie Goodman	Case number (if known)				
4.2 9	Portfolio Recov Assoc	Last 4 digits of account number	2356	\$671.00		
	Nonpriority Creditor's Name 120 Corporate Blvd Ste 100 Norfolk, VA 23502	When was the debt incurred?	Opened 06/19			
	Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim				
	Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:			
	☐ Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not			
	■ No	Debts to pension or profit-sharing	ng plans, and other similar debts			
	□Yes		Company Account Comenity			
4.3	Portfolio Recov Assoc	Last 4 digits of account number	6357	\$557.00		
	Nonpriority Creditor's Name 120 Corporate Blvd Ste 100 Norfolk, VA 23502	When was the debt incurred?	Opened 06/19			
	Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply			
	Who incurred the debt? Check one.					
	Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	Debtor 1 and Debtor 2 only	☐ Disputed				
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:			
	☐ Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims				
		Debts to pension or profit-sharing				
	No					
	Yes	Other. Specify Bank	Company Account Synchrony			
4.3	Premier Members Credit	Last 4 digits of account number	0151	\$8,063.00		
	Nonpriority Creditor's Name	_				
	5505 Arapahoe Ave Boulder, CO 80303	When was the debt incurred?	Opened 12/12 Last Active 12/30/19			
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply			
	Debtor 1 only	■ Debtor 1 only □ Contingent				
	Debtor 2 only					
	☐ Debtor 1 and Debtor 2 only	☐ Unliquidated☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure				
	☐ Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not			
	No	Debts to pension or profit-sharing	ng plans, and other similar debts			
	☐ Yes	Other. Specify Automobile				

T-Mobile Bankruptcy Team	Last 4 digits of account number 1187	\$1,087.6
Nonpriority Creditor's Name PO Box 53410 Bellevue, WA 98015	When was the debt incurred?	
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
☐ Debtor 1 only	☐ Contingent	
☐ Debtor 2 only	☐ Unliquidated	
■ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	$\hfill \Box$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	$\square$ Debts to pension or profit-sharing plans, and other similar debts	
Yes	Other. Specify Utilities	
The Holland Team	Last 4 digits of account number 0109	\$2,896.2
Nonpriority Creditor's Name 6120 Grrenwood Plaza Blvd #100B Englewood, CO 80111	When was the debt incurred?	
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
☐ Debtor 1 only	☐ Contingent	
☐ Debtor 2 only	☐ Unliquidated	
■ Debtor 1 and Debtor 2 only	☐ Disputed	
lacksquare At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
No	☐ Debts to pension or profit-sharing plans, and other similar debts	
□ Yes	■ Other Specify Rental	
TMX Finance of Tennessee, INC	Last 4 digits of account number 2827	\$2,011.05
Nonpriority Creditor's Name	Last 4 digits of account number 2827	Ψ2,011.0
d/b/a TitleMax Legal Department	When was the debt incurred?	
P.O. Box 8323		
Savannah, GA 31412  Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	As of the date you me, the claim is. Oneok an that apply	
☐ Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
■ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	
No	☐ Debts to pension or profit-sharing plans, and other similar debts	
☐ Yes	■ Other, Specify Line of Credit	

Debtor 2	Sean Michael Goodman Nicole Marie Goodman		Case number (if known)					
4.3 5	Verizon Wireless	Last 4 digits of account number	0001	\$2,992.00				
	Nonpriority Creditor's Name		0					
	National Recovery Operations Minneapolis, MN 55426	When was the debt incurred?	Opened 06/08 Last Active 6/30/18	-				
	Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply					
	Debtor 1 only							
	_	☐ Contingent						
	Debtor 2 only	☐ Unliquidated						
	Debtor 1 and Debtor 2 only	Disputed	d oloim.					
	At least one of the debtors and another	Type of NONPRIORITY unsecure  ☐ Student loans	d Claim:					
	☐ Check if this claim is for a community debt		aration agreement or divorce that you did not					
	Is the claim subject to offset?	report as priority claims	aration agreement or divorce that you did not					
	■ No	Debts to pension or profit-shari	ng plans, and other similar debts					
	Yes	Other. Specify						
				-				
4.3	Wells Fargo Bank	Last 4 digits of account number	0281	\$884.00				
	Nonpriority Creditor's Name		0					
	Credit Bureau Dispute Resoluti Des Moines, IA 50306	When was the debt incurred?	Opened 03/16 Last Active 6/07/18	-				
	Number Street City State Zip Code							
	Who incurred the debt? Check one.							
	☐ Debtor 1 only	☐ Contingent						
	Debtor 2 only	☐ Unliquidated						
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	☐ Disputed  Type of NONPRIORITY unsecured claim:					
	☐ At least one of the debtors and another	_						
	☐ Check if this claim is for a community	Student loans	☐ Student loans					
	debt Is the claim subject to offset?	Obligations arising out of a separe report as priority claims	aration agreement or divorce that you did not					
	■ No	☐ Debts to pension or profit-sharing	ng plans, and other similar debts					
	☐ Yes	■ Other. Specify Credit Care	d .					
				<u>-</u>				
is tryir have n notifie	is page only if you have others to be notified ng to collect from you for a debt you owe to s nore than one creditor for any of the debts th d for any debts in Parts 1 or 2, do not fill out	about your bankruptcy, for a debt that someone else, list the original creditor in the total you listed in Parts 1 or 2, list the add or submit this page.	n Parts 1 or 2, then list the collection agency itional creditors here. If you do not have add	y here. Similarly, if you				
	nd Address n Collection Agency Inc	On which entry in Part 1 or Part 2 did you Line <b>4.26</b> of ( <i>Check one</i> ):	l list the original creditor? I Part 1: Creditors with Priority Unsecured Clai	ims				
c/o Bla 8668 S	ack Hills Colorado Gas Util Spring Mountain Rd.	<u> </u>	Part 2: Creditors with Nonpriority Unsecured					
Las ve	egas, NV 89117-4113	Last 4 digits of account number	8512					
Name ar	nd Address	On which entry in Part 1 or Part 2 did you	list the original creditor?					
	can Family Insurance		Part 1: Creditors with Priority Unsecured Cla	ims				
Compa			Part 2: Creditors with Nonpriority Unsecured	Claims				
	American Parkway on, WI 53783		·					
mauist	on, 111 oor oo	Last 4 digits of account number						
	nd Address	On which entry in Part 1 or Part 2 did you	list the original creditor?					
_	ey General of the United	Line <b>4.10</b> of ( <i>Check one</i> ):	Part 1: Creditors with Priority Unsecured Cla	ims				
	partment of Justice ennsylvania Ave., NW	•	Part 2: Creditors with Nonpriority Unsecured	Claims				

Debtor 1 Sean Michael Goodman Debtor 2 Nicole Marie Goodman		Case number (if known)
Washington, DC 20530-0001	Last 4 digits of account number	
	<del>-</del>	
Name and Address  Banfield Pet Hospital	On which entry in Part 1 or Part 2 did Line <b>4.23</b> of ( <i>Check one</i> ):	l you list the original creditor? ☐ Part 1: Creditors with Priority Unsecured Claims
18101 SE 6th Way	en (enear ene).	Part 2: Creditors with Nonpriority Unsecured Claims
Vancouver, WA 98683	Last 4 digits of account number	7576
	Last 1 digits of account fidings	1310
Name and Address Biehl & Biehl, Inc.	On which entry in Part 1 or Part 2 did	
Agent for: Biotel Heart	Line 4.5 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims ☐ Part 2: Creditors with Nonpriority Unsecured Claims
P.O. Box 87410		Part 2: Creditors with Nonphority Onsecured Claims
Carol Stream, IL 60188-7410	Last 4 digits of account number	7728
Name and Address	On which entry in Part 1 or Part 2 did	I you list the original creditor?
Black Hills Colorado Gas Utility	Line 4.26 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims
Company 1301 W 24th St.		■ Part 2: Creditors with Nonpriority Unsecured Claims
Cheyenne, WY 82001		
	Last 4 digits of account number	2035
Name and Address	On which entry in Part 1 or Part 2 did	I you list the original creditor?
Cavalry SPV I, LLC	Line 4.9 of (Check one):	Part 1: Creditors with Priority Unsecured Claims
Agent For: Citibank PO Box 520		■ Part 2: Creditors with Nonpriority Unsecured Claims
Valhalla, NY 10595	Look 4 digita of account number	00414
	Last 4 digits of account number	081K
Name and Address Citibank	On which entry in Part 1 or Part 2 did	· •
Citicorp Credit Services	Line 4.11 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims ☐ Part 2: Creditors with Nonpriority Unsecured Claims
P O Box 6069		Part 2: Creditors with Nonpriority Onsecured Claims
Sioux Falls, SD 57117-6069	Last 4 digits of account number	
Name and Address	On which entry in Part 1 or Part 2 did	you list the original creditor?
Comcast Corporate Headquaters	Line 4.22 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims
Attn: Bankruptcy Department One Comcast Center		■ Part 2: Creditors with Nonpriority Unsecured Claims
Philadelphia, PA 19103		
	Last 4 digits of account number	4115
Name and Address	On which entry in Part 1 or Part 2 did	
Constar Financial Services, LLC 10400 N 25th Ave, Suite 100	Line <b>4.20</b> of ( <i>Check one</i> ):	Part 1: Creditors with Priority Unsecured Claims
Phoenix, AZ 85021		■ Part 2: Creditors with Nonpriority Unsecured Claims
	Last 4 digits of account number	7508
Name and Address	On which entry in Part 1 or Part 2 did	·
Convergent Outsourcing, Inc Agent For: Paypal Buyer Credit	Line 4.2 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims
GEMB		■ Part 2: Creditors with Nonpriority Unsecured Claims
800 SW 39th Street		
Renton, WA 98057	Last 4 digits of account number	6564
Name and Address	On which entry in Bort 1 or Bort 2 dia	d you list the original graditor?
Credit Collection Services	On which entry in Part 1 or Part 2 did Line <b>4.36</b> of ( <i>Check one</i> ):	i you list the original creditor?  ☐ Part 1: Creditors with Priority Unsecured Claims
Agent for	. ,	Part 2: Creditors with Nonpriority Unsecured Claims
725 Canton Street Norwood, MA 02062		
, <b></b>	Last 4 digits of account number	8573
Name and Address	On which entry in Part 1 or Part 2 did	you list the original creditor?
Diversified Consultants, Inc.	Line <b>4.35</b> of ( <i>Check one</i> ):	☐ Part 1: Creditors with Priority Unsecured Claims

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Page 44 of 60 Main Document Debtor 1 Sean Michael Goodman Debtor 2 Nicole Marie Goodman Case number (if known) **Agent for: Verizon Wireless** ■ Part 2: Creditors with Nonpriority Unsecured Claims PO Box 1391 Southgate, MI 48195-0391 Last 4 digits of account number 5939 Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? **Diversified Consultants. Inc.** Line 4.22 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims Agent for: Comcast ■ Part 2: Creditors with Nonpriority Unsecured Claims PO Box 1391 Southgate, MI 48195-0391 Last 4 digits of account number 0000 Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? **Equifax Information Services LLC** Line 4.10 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims P O Box 740241 ■ Part 2: Creditors with Nonpriority Unsecured Claims Atlanta, GA 30374-0241 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? **ERC** Line 4.22 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims Agent for comcast Part 2: Creditors with Nonpriority Unsecured Claims P.O. Box 57610 Jacksonville, FL 32241 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? Experian Line 4.10 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims P O Box 2002 ■ Part 2: Creditors with Nonpriority Unsecured Claims Allen, TX 75013 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? Finklestein, Kern, Steinberg & Line 4.9 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims Cunningha ■ Part 2: Creditors with Nonpriority Unsecured Claims for **P.O. Box 1** Knoxville, TN 37901 Last 4 digits of account number 4150 Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? **HCA - Aurora Denver Cardiology** Line 4.6 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims P.O. Box 14099 ■ Part 2: Creditors with Nonpriority Unsecured Claims Belfast, ME 04915 Last 4 digits of account number A980 Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? Holst, Boettcher & Tehrani, LLP Line 4.31 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims 514 Kimbark Street ■ Part 2: Creditors with Nonpriority Unsecured Claims P.O. Box 298 Longmont, CO 80502-0298 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? Internal Revenue Service Line 2.1 of (Check one): ■ Part 1: Creditors with Priority Unsecured Claims **Special Procedures Branch** ☐ Part 2: Creditors with Nonpriority Unsecured Claims **Attn Bankruptcy Section MDP 146** 801 Broadway, Room 285 Nashville, TN 37203 Last 4 digits of account number On which entry in Part 1 or Part 2 did you list the original creditor? Name and Address Monarch Recovery Management, Inc Line 4.30 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims ■ Part 2: Creditors with Nonpriority Unsecured Claims

Agent for: Synchrony Bank 3260 Tillman Dr

Suite 75 Bensalem, PA 19020

Last 4 digits of account number 3465 Case 3:20-bk-30380-SHB Doc 1 Filed 02/07/20 Entered 02/07/20 15:09:35

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Debtor 1 Sean Michael Goodman Debtor 2 Nicole Marie Goodman Case number (if known) Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? **NCB Management Services** Line 4.7 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims Agent for: Cabela's/WFB Visa ■ Part 2: Creditors with Nonpriority Unsecured Claims Center P O Box 1099 Langhorne, PA 19047 Last 4 digits of account number 1434 Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? Paypal Buyer Credit GEMB Line 4.2 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims **Bankruptcy Dept** ■ Part 2: Creditors with Nonpriority Unsecured Claims P O Box 103104 Roswell, GA 30076 Last 4 digits of account number 8662 On which entry in Part 1 or Part 2 did you list the original creditor? Name and Address **Proactiv** Line 4.28 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims P.O. Box 2021 ■ Part 2: Creditors with Nonpriority Unsecured Claims Harlan, IA 51593 Last 4 digits of account number On which entry in Part 1 or Part 2 did you list the original creditor? Name and Address **Radius Global Solution LLC** Line 4.36 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims Agent for: Wells Fargo Bank ■ Part 2: Creditors with Nonpriority Unsecured Claims P.O. Box 390915 Minneapolis, MN 55439 Last 4 digits of account number 8151 Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? **RPM** Line 4.35 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims Agent for: ■ Part 2: Creditors with Nonpriority Unsecured Claims 20818 44th Ave W Suite 140 Lynnwood, WA 98036 Last 4 digits of account number 3037 Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? Sentry Credit Inc. Line 4.27 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims Agent For: Nissan Motor Acceptanc Part 2: Creditors with Nonpriority Unsecured Claims 2809 Grand Ave. Everett, WA 98201 Last 4 digits of account number 0930 Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? Synergetic Communication Line 4.27 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims Agent for: Nissan Motor Acceptanc ■ Part 2: Creditors with Nonpriority Unsecured Claims 5450 N. W. Central #220 Houston, TX 77092 Last 4 digits of account number 7102 On which entry in Part 1 or Part 2 did you list the original creditor? Name and Address **Tennessee Attorney General's** Line 2.1 of (Check one): ■ Part 1: Creditors with Priority Unsecured Claims Office ☐ Part 2: Creditors with Nonpriority Unsecured Claims **Bankruptcy Division** PO Box 20207 Nashville, TN 37202-0207 Last 4 digits of account number On which entry in Part 1 or Part 2 did you list the original creditor? Name and Address **The Medical Center Aurora** Line 4.25 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims 1501 S Potomac St Part 2: Creditors with Nonpriority Unsecured Claims Aurora, CO 80012 Last 4 digits of account number On which entry in Part 1 or Part 2 did you list the original creditor? Name and Address **Trans Union** Line 4.10 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims

Official Form 106 E/F

Debtor 1 Sean Michael Goodman Debtor 2 Nicole Marie Goodman		Case number (if known)
P O Box 2000 Chester, PA 19022	Last 4 digits of account number	■ Part 2: Creditors with Nonpriority Unsecured Claims
Name and Address US Attorney's Office Howard H. Baker, Jr. U.S. Courthouse 800 Market St., Ste 211 Attn: Ann Holden or Civil Process Clerk Knoxville, TN 37902	On which entry in Part 1 or Part 2 Line 2.1 of ( <i>Check one</i> ):	did you list the original creditor?  Part 1: Creditors with Priority Unsecured Claims  Part 2: Creditors with Nonpriority Unsecured Claims
Knoxville, 1N 37902	Last 4 digits of account number	
Name and Address US Dept of Education P.O. Box 5609 Greenville, TX 75403	On which entry in Part 1 or Part 2 Line 4.10 of (Check one): Last 4 digits of account number	did you list the original creditor?  Part 1: Creditors with Priority Unsecured Claims  Part 2: Creditors with Nonpriority Unsecured Claims
Name and Address US Dept of Education 50 United Nations Plaza Mailbox 1200, Suite 1273 San Francisco, CA 94102	On which entry in Part 1 or Part 2 Line 4.10 of (Check one):  Last 4 digits of account number	did you list the original creditor?  Part 1: Creditors with Priority Unsecured Claims  Part 2: Creditors with Nonpriority Unsecured Claims
Name and Address Weld County Colorado County Court 901 9th Avenue Greeley, CO 80631	On which entry in Part 1 or Part 2 Line 4.31 of (Check one):	did you list the original creditor?  □ Part 1: Creditors with Priority Unsecured Claims ■ Part 2: Creditors with Nonpriority Unsecured Claims

#### Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				Total Claim
Total	6a.	Domestic support obligations	6a.	\$ 0.00
claims from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$ 6,655.18
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$ 0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$ 0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$ 6,655.18
				Total Claim
Total	6f.	Student loans	6f.	\$ 82,896.00
claims from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$ 0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$ 0.00
	6i.	<b>Other.</b> Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$ 52,241.62
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$ 135,137.62

Last 4 digits of account number

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Fill in this infor	mation to identify your	case:		
Debtor 1	Sean Michael Go	odman		
	First Name	Middle Name	Last Name	
Debtor 2	Nicole Marie Goo	dman		
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	EASTERN DISTRICT C	OF TENNESSEE	
Case number				
(if known)				

### Official Form 106G

### **Schedule G: Executory Contracts and Unexpired Leases**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
  - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
  - Tyes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

ı	Person or	company with Name, Number	whom you have th	e contract or lease	State what the contract or lease is for
2.1					
	Name				
	Number	Street			
	City		State	ZIP Code	_
2.2					
	Name				
	Number	Street			<del>_</del>
	City		State	ZIP Code	<u> </u>
2.3	Oity		Olato	211 0000	
	Name				
	Number	Street			<u> </u>
	City		State	ZIP Code	
2.4					
	Name				
	Number	Street			<u> </u>
	City		State	ZIP Code	<u> </u>
2.5	- iii		Oldio	211 0000	
	Name				
	Number	Street			
	City		State	ZIP Code	<u> </u>

		Main Document	Page 48	of 60	
Fill in this i	information to identify your ca	se:			
Debtor 1	Sean Michael Good				
Debtor 2	First Name	Middle Name	Last Name		
(Spouse if, filing	Nicole Marie Goodr First Name	Middle Name	Last Name		
United State	es Bankruptcy Court for the:	EASTERN DISTRICT OF TENI	NESSEE		
Case numb	er				☐ Check if this is an amended filing
Official	Form 106H				
	ule H: Your Code	btors			12/15
1. Do y	and case number (if known). A		ist either spouse as	a codebtor.	
■ No □ Yes					
	in the last 8 years, have you li a, California, Idaho, Louisiana, N				
	Go to line 3.  Did your spouse, former spouse	e, or legal equivalent live with y	ou at the time?		
in line : Form 1	2 again as a codebtor only if tl	nat person is a guarantor or o	osigner. Make sui	re you have listed t	ng with you. List the person shown he creditor on Schedule D (Official Schedule E/F, or Schedule G to fill
	Column 1: Your codebtor ame, Number, Street, City, State and ZIP C	Code		Column 2: The cr Check all schedul	editor to whom you owe the debt es that apply:
3.1				☐ Schedule D, lir	ne
N	lame			☐ Schedule E/F,	
_				☐ Schedule G, lir	ne
	lumber Street City	State	ZIP Code		
3.2				☐ Schedule D, lir	ne
	lame			☐ Schedule E/F,☐ Schedule G, lir	line
	lumber Street	•	710.0		
C	City	State	ZIP Code		

Fill in this informat	tion to identify your case:	
Debtor 1	Sean Michael Goodman	
Debtor 2 (Spouse, if filing)	Nicole Marie Goodman	
United States Ban	skruptcy Court for the: EASTERN DISTRICT OF TENNESSEE	
Case number (If known)		Check if this is:  ☐ An amended filing ☐ A supplement showing postpetition chapte
Official Fo	rm 106l	13 income as of the following date:

Schedule I: Your Income

12/15

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	Describe Employment			
1.	Fill in your employment information.		Debtor 1	Debtor 2 or non-filing spouse
	If you have more than one job, attach a separate page with	Employment status	■ Employed	☐ Employed
	information about additional		☐ Not employed	■ Not employed
	employers.	Occupation	Service writer	
	Include part-time, seasonal, or self-employed work.	Employer's name	Smoky Mountain Harley Davidson	
	Occupation may include student or homemaker, if it applies.	Employer's address	1820 W Lamar Alexander Pkwy Maryville, TN 37801	
		How long employed th	ere? 1.5 yrs	

Part 2: Give Details About Monthly Income

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filling spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

For Debtor 1 For Debtor 2 or non-filing spouse List monthly gross wages, salary, and commissions (before all payroll 2,253.33 0.00 deductions). If not paid monthly, calculate what the monthly wage would be. Estimate and list monthly overtime pay. 3. 3. 0.00 +\$ 0.00 Calculate gross Income. Add line 2 + line 3. 2,253.33 0.00

Official Form 106l Schedule I: Your Income page 1

	tor 1 tor 2	Sean Michael Goodman Nicole Marie Goodman	_		Case	number (if known)	_				
						Debtor 1			ebtor 2	ouse	
	Cop	by line 4 here	4.		\$_	2,253.33	_	\$		0.00	_
5.	List	all payroll deductions:									
	5a.	Tax, Medicare, and Social Security deductions	58	а.	\$	274.65		\$		0.00	)
	5b.	Mandatory contributions for retirement plans	5b		\$	0.00	_	\$		0.00	_
	5c.	Voluntary contributions for retirement plans	50	Э.	\$	0.00	_	\$		0.00	_
	5d.	Required repayments of retirement fund loans	50	d.	\$	0.00	_	\$		0.00	
	5e.	Insurance	56	э.	\$	501.89	_	\$		0.00	_
	5f.	Domestic support obligations	5f	i.	\$	0.00	_	\$		0.00	
	5g.	Union dues	50	g.	\$	0.00		\$		0.00	
	5h.	Other deductions. Specify:	5h	ո.+	\$	0.00	+	\$		0.00	
6.	Add	I the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.		\$_	776.54	_	\$		0.00	_
7.	Cal	culate total monthly take-home pay. Subtract line 6 from line 4.	7.		\$	1,476.79	_	\$		0.00	<u> </u>
8.	List 8a.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	88	a.	\$	0.00		\$		0.00	
	8b.	Interest and dividends	8k		\$_	0.00	_	\$		0.00	_
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	: 80	С.	\$	0.00	_	\$		0.00	_
	8d.	Unemployment compensation	80	d.	\$	0.00	_	\$		0.00	
	8e.	Social Security	86	Э.	\$	0.00	_	\$	2,0	55.00	_
	8f. 8g. 8h.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: Pension or retirement income Other monthly income. Specify:	8f 8g		\$_ \$_ \$	0.00 0.00 0.00	_	\$ \$		0.00 0.00 0.00	_
	OII.	Other monthly moonie. Specify.	_ 01	I. <del>T</del>	Ψ_	0.00	- T	<u>_</u>		0.00	
9.	Add	l all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.		\$	0.00		\$	2.	,055.0	0
10	Cal	culate monthly income. Add line 7 + line 9.	10.	¢		1,476.79 +	:	2.05	5.00	= \$	3,531.79
10.		the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10.	Ψ –		1,470.79	_	2,03	3.00	-	3,331.73
11.	Star Incli othe Do	te all other regular contributions to the expenses that you list in <i>Schedule</i> ude contributions from an unmarried partner, members of your household, your or friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not cify:	dep			. ,	•		hedule 11.	_	0.00
12.		If the amount in the last column of line 10 to the amount in line 11. The reserve that amount on the Summary of Schedules and Statistical Summary of Certailies							12.	\$	3,531.79
13.	Do	you expect an increase or decrease within the year after you file this form	1?							Combi month	ned ly income
		No. Yes. Explain:									

				,		1		
Fill	in this informa	tion to identify yo	our case:					
Deb	tor 1	Sean Michae	el Goodm	an		Chec	k if this is:	
	otor 2	Nicole Marie	Goodma	ın			An amended filing A supplement show 13 expenses as of	ving postpetition chapter the following date:
Linit	ad States Bankı	runtey Court for the	· FASTE	RN DISTRICT OF TENNE	SSEE	_	MM / DD / YYYY	
		apicy Court for the	. LASIL	IN DISTRICT OF TENNE	<u> </u>		WIWI / DD / TTTT	
1	e number nown)							
Of	fficial Fo	rm 106J						
S	chedule	J: Your I	Exper	ises				12/1
info	ormation. If m		eded, atta	If two married people ar ch another sheet to this n.				
Par		ribe Your House	hold					
1.	Is this a joir							
	□ No. Go to	o line 2. es Debtor 2 live i	in a senar	ate household?				
	= 1es. <b>Do</b> c		iii a sepai	ate nousenoid:				
		-	st file Offici	al Form 106J-2, <i>Expense</i> s	for Separate House	ehold of Debt	tor 2.	
2.	Do you hav	e dependents?	□ No					
	Do not list D Debtor 2.	ebtor 1 and	Yes.	Fill out this information for each dependent	Dependent's relat Debtor 1 or Debto		Dependent's age	Does dependent live with you?
	Do not state dependents				Daughter		13	□ No ■ Yes □ No □ Yes □ No
3.		penses include	_	No				☐ Yes ☐ No ☐ Yes
		f people other ti d your depende		Yes				
exp	imate your ex		our bankr	y Expenses uptcy filing date unless y y is filed. If this is a supp				
the		h assistance an		government assistance i luded it on <i>Schedule I:</i> )			Your exp	enses
4.		or home owners		ses for your residence. In	nclude first mortgag	e 4. \$		920.00
	If not include	led in line 4:						
	4a. Real e	estate taxes				4a. \$		0.00
	4b. Prope	rty, homeowner's				4b. \$		0.00
		maintenance, re owner's associat		ipkeep expenses		4c. \$ 4d. \$		0.00
5.				ominium dues our residence, such as ho	me equity loans	4a. \$ 5. \$		0.00 0.00

Debtor 1 Sean Michael Goodman		
Pebtor 2 Nicole Marie Goodman	Case nu	mber (if known)
. Utilities:		
6a. Electricity, heat, natural gas	6a	ı. \$ <b>120</b> .
6b. Water, sewer, garbage collection	6b	·
6c. Telephone, cell phone, Internet, satellite, and		· : ———————————————————————————————————
6d. Other. Specify:	6d	
Food and housekeeping supplies		
Childcare and children's education costs	8	
Clothing, laundry, and dry cleaning	ę	200.
Personal care products and services	10	). \$ <del></del>
Medical and dental expenses	11	. \$ 50.
Transportation. Include gas, maintenance, bus or	train fare.	
Do not include car payments.	12	·
Entertainment, clubs, recreation, newspapers, r	=	·
Charitable contributions and religious donation	s 14	. \$ <b>0</b> .
Insurance.	a included in lines 4 at 00	
Do not include insurance deducted from your pay of 15a. Life insurance		ı. \$ <b>0</b> .
15b. Health insurance		0. \$ 0.
15c. Vehicle insurance	150	· ·
15d. Other insurance. Specify:	150	·
Taxes. Do not include taxes deducted from your pa		υ. φ
Specify:	19 of included in lines 4 of 20.	s. \$ <b>0</b> .
Installment or lease payments:		•
17a. Car payments for Vehicle 1	17a	. \$ 340.
17b. Car payments for Vehicle 2	17b	o. \$ 0.
17c. Other. Specify: Storage	170	
17d. Other. Specify:	17d	
Your payments of alimony, maintenance, and si	upport that you did not report as	-
deducted from your pay on line 5, Schedule I, Y		s. \$ <b>0</b> .
Other payments you make to support others wh	o do not live with you.	\$0.
Specify:	19	
Other real property expenses not included in lin		
20a. Mortgages on other property		\$ <b>0</b> .
20b. Real estate taxes	20b	·
20c. Property, homeowner's, or renter's insurance		· \$0.
20d. Maintenance, repair, and upkeep expenses	200	· · · · · · · · · · · · · · · · · · ·
20e. Homeowner's association or condominium d		·
Other: Specify: Pet Care	21	. +\$ 100.
Calculate your monthly expenses		
22a. Add lines 4 through 21.		\$ 3,471.00
22b. Copy line 22 (monthly expenses for Debtor 2),	if any, from Official Form 106J-2	\$
22c. Add line 22a and 22b. The result is your month	hly expenses.	\$ 3,471.00
•	The state of the s	5,471.00
Calculate your monthly net income.		
23a. Copy line 12 (your combined monthly income	,	3,531.
23b. Copy your monthly expenses from line 22c a	bove. 23b	3,471.
On Outstand on the	and the Common	
23c. Subtract your monthly expenses from your m	nonthly income. 23c	s. \$ 60.
The result is your monthly net income.	230	" L <sup>+</sup>
Do you expect an increase or decrease in your of For example, do you expect to finish paying for your car lo modification to the terms of your mortgage? No.		
■ No.  Evolain here:		

Fill in this i	information to identify your	case:	
Debtor 1	Sean Michael Go	odman	
	First Name	Middle Name Last Name	
Debtor 2	Nicole Marie Goo		
(Spouse if, filing	g) First Name	Middle Name Last Name	
United State	es Bankruptcy Court for the:	EASTERN DISTRICT OF TENNESSEE	
Case numb	er		
(if known)			☐ Check if this is an amended filing
Decla		n Individual Debtor's	
You must fil obtaining m	le this form whenever you f	le bankruptcy schedules or amended sche	edules. Making a false statement, concealing property, or result in fines up to \$250,000, or imprisonment for up to 20
You must fil obtaining m years, or bo	le this form whenever you for property by fraud in the 18 U.S.C. §§ 152, 1341, 2	le bankruptcy schedules or amended sche	edules. Making a false statement, concealing property, or result in fines up to \$250,000, or imprisonment for up to 20
You must fil obtaining m years, or bo	le this form whenever you for noney or property by fraud in oth. 18 U.S.C. §§ 152, 1341, 2 Sign Below	le bankruptcy schedules or amended sche n connection with a bankruptcy case can r 519, and 3571.	edules. Making a false statement, concealing property, or result in fines up to \$250,000, or imprisonment for up to 20
You must fil obtaining m years, or bo  Did yo	le this form whenever you for noney or property by fraud in oth. 18 U.S.C. §§ 152, 1341, 2 Sign Below	le bankruptcy schedules or amended sche n connection with a bankruptcy case can r 519, and 3571.	edules. Making a false statement, concealing property, or result in fines up to \$250,000, or imprisonment for up to 20  Ill out bankruptcy forms?  Attach Bankruptcy Petition Preparer's Notice,
You must fil obtaining m years, or bo Did yo N	le this form whenever you formey or property by fraud in the 18 U.S.C. §§ 152, 1341, 2 Sign Below  ou pay or agree to pay some low.  Yes. Name of person  penalty of perjury, I declare	le bankruptcy schedules or amended sche n connection with a bankruptcy case can r 519, and 3571.	edules. Making a false statement, concealing property, or result in fines up to \$250,000, or imprisonment for up to 20  Ill out bankruptcy forms?  Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119)
You must fil obtaining m years, or bo Did yo N	le this form whenever you formey or property by fraud in the 18 U.S.C. §§ 152, 1341, 2 Sign Below  ou pay or agree to pay some location. Name of person	le bankruptcy schedules or amended sche n connection with a bankruptcy case can r 519, and 3571.	edules. Making a false statement, concealing property, or result in fines up to \$250,000, or imprisonment for up to 20  Ill out bankruptcy forms?  Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119)
You must fil obtaining m years, or bo  Did yo  N  V  Under I that the	le this form whenever you formey or property by fraud in the 18 U.S.C. §§ 152, 1341, 2 Sign Below  ou pay or agree to pay some low.  Yes. Name of person  penalty of perjury, I declare	le bankruptcy schedules or amended schen connection with a bankruptcy case can result of the state of the sta	edules. Making a false statement, concealing property, or result in fines up to \$250,000, or imprisonment for up to 20  Ill out bankruptcy forms?  Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119)
You must fill obtaining myears, or bo  Did yo  N  V  Under path the state of the st	le this form whenever you for honey or property by fraud in oth. 18 U.S.C. §§ 152, 1341, 2 Sign Below  Ou pay or agree to pay some of the company of person  penalty of perjury, I declare ey are true and correct.  Sean Michael Goodman ean Michael Goodman	that I have read the summary and schedules  X /s/ Ni	edules. Making a false statement, concealing property, or result in fines up to \$250,000, or imprisonment for up to 20  Ill out bankruptcy forms?  Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119)  Iles filed with this declaration and icole Marie Goodman  Ile Marie Goodman
You must fill obtaining myears, or bo  Did yo  N  V  Under path the state of the st	le this form whenever you formey or property by fraud in oth. 18 U.S.C. §§ 152, 1341, 2 Sign Below  Ou pay or agree to pay some low. Name of person  penalty of perjury, I declare ey are true and correct.	that I have read the summary and schedules  X /s/ Ni	edules. Making a false statement, concealing property, or result in fines up to \$250,000, or imprisonment for up to 20  Ill out bankruptcy forms?  Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119)  Illes filed with this declaration and icole Marie Goodman

## **United States Bankruptcy Court Eastern District of Tennessee**

In re	Nicole Marie Goodman		Case No.	
		Debtor(s)	Chapter	7

### **VERIFICATION OF CREDITOR MATRIX**

The above Debtor(s) hereby verifies under the penalty of perjury under the laws of the United States of America that the attached list of creditors is true and correct to the best of his/her knowledge.

Date:	February 6, 2020	/s/ Sean Michael Goodman	
		Sean Michael Goodman	
		Signature of Debtor	
Date:	February 6, 2020	/s/ Nicole Marie Goodman	
		Nicole Marie Goodman	
		Signature of Debtor	
Date:	February 6, 2020	/s/ Cynthia T. Lawson	
		Signature of Attorney	
		Cynthia T. Lawson 018397	
		Bond, Botes & Lawson, P.C.	
		6704 Watermour Way	
		Knoxville, TN 37912	
		(865) 938-0733	

Aargon Collection Agency Inc c/o Black Hills Colorado Gas Util 8668 Spring Mountain Rd. Las Vegas, NV 89117-4113

Allegiance POB 3018 Missoula, MT 59806

American Coradius International, LLC Agent For: PayPal, Inc 2420 Sweet Home Road Suite 150 Buffalo, NY 14228-2244

American Family Insurance Company 6000 American Parkway Madison, WI 53783

Aspen Family Care & Aspen Medical 9331 S Colorado Blvd #200 Littleton, CO 80126

Attorney General of the United States US Department of Justice 950 Pennsylvania Ave., NW Washington, DC 20530-0001

Banfield Pet Hospital 18101 SE 6th Way Vancouver, WA 98683

Bc Services Inc 550 Disc Dr Longmont, CO 80503

Biehl & Biehl, Inc. Agent for: Biotel Heart P.O. Box 87410 Carol Stream, IL 60188-7410

Biotel Heart 10255 W Higgins Rd. Des Plaines, IL 60018-5606

Black Hills Colorado Gas Utility Company 1301 W 24th St. Cheyenne, WY 82001

Budget Control Service 2950 S Jamaica Ct Aurora, CO 80014 Cabela's/WFB Visa Center PO Box 82608 Lincoln, NE 68501-2608

Cavalry Portfolio Serv 500 Summit Lake Drive Valhalla, NY 10595

Cavalry SPV I, LLC Agent For: Citibank PO Box 520 Valhalla, NY 10595

Chex Systems Consumer Relations 7805 Hudson Rd Ste 100 Woodbury, MN 55125

Citibank Citicorp Credit Services P O Box 6069 Sioux Falls, SD 57117-6069

Client Services Inc Agent for: Citibank, N.A. 3451 Harry S Truman Blvd Saint Charles, MO 63301-4047

Colorado Department of Revenue 1375 Sherman St. Denver, CO 80203

Comcast Corporate Headquaters Attn: Bankruptcy Department One Comcast Center Philadelphia, PA 19103

Constar Financial Services, LLC 10400 N 25th Ave, Suite 100 Phoenix, AZ 85021

Convergent Outsourcing, Inc Agent For: Paypal Buyer Credit GEMB 800 SW 39th Street Renton, WA 98057

Credit Collection Services Agent for: American Family Insurance Com 725 Canton Street Norwood, MA 02062

Credit Collection Services Agent for 725 Canton Street Norwood, MA 02062 Denver Mattress Company 8375 Park Meadows Dr. Lone Tree, CO 80124

Dept Of Education/neln Po Box 82561 Lincoln, NE 68501

Diversified Consultants, Inc. Agent for: Verizon Wireless PO Box 1391 Southgate, MI 48195-0391

Diversified Consultants, Inc. Agent for: Comcast PO Box 1391 Southgate, MI 48195-0391

E-470 Public Highway Authority P.O. Box 5470 Denver, CO 80217-5470

Equifax Information Services LLC P O Box 740241 Atlanta, GA 30374-0241

**ERC** 

Agent for comcast P.O. Box 57610 Jacksonville, FL 32241

Esb/harley Davidson Cr 3850 Arrowhead Drive Carson City, NV 89706

Experian P O Box 2002 Allen, TX 75013

ExpressToll 22470 E. Stephen D. Hogan Parkway Suite 110 Aurora, CO 80018

FBCS, Inc. Agent For: Comcast PO Box 1116 Charlotte, NC 28201

Finklestein, Kern, Steinberg & Cunningha for P.O. Box 1 Knoxville, TN 37901 HCA - Aurora Denver Cardiology
P.O. Box 14099
Belfast, ME 04915

Holst, Boettcher & Tehrani, LLP 514 Kimbark Street P.O. Box 298 Longmont, CO 80502-0298

I.c. System, Inc
Po Box 64378
Saint Paul, MN 55164

Internal Revenue Service Centralized Insolvency Operation P.O. Box 7346 Philadelphia, PA 19101-7346

Internal Revenue Service Special Procedures Branch Attn Bankruptcy Section MDP 146 801 Broadway, Room 285 Nashville, TN 37203

Matrix Absence Management P.O. Box 13498 Philadelphia, PA 19101

Medicredit, Inc. Agent For: The Medical Center Aurora P.O. Box 1629 Maryland Heights, MO 63043-0629

Monarch Recovery Management, Inc Agent for: Synchrony Bank 3260 Tillman Dr Suite 75 Bensalem, PA 19020

MRS BPO, LLC Agent For: Black Hills Colorado Gas Util 1930 Olney Avenue Cherry Hill, NJ 08003

NCB Management Services Agent for: Cabela's/WFB Visa Center P O Box 1099 Langhorne, PA 19047

Nissan Motor Acceptanc P.o. Box 660366 Dallas, TX 75266 Northshore Agency Inc. c/o Proactiv P. O. Box 9205 Old Bethpage, NY 11804

Paypal Buyer Credit GEMB Bankruptcy Dept P O Box 103104 Roswell, GA 30076

Portfolio Recov Assoc 120 Corporate Blvd Ste 100 Norfolk, VA 23502

Premier Members Credit 5505 Arapahoe Ave Boulder, CO 80303

Proactiv P.O. Box 2021 Harlan, IA 51593

Radius Global Solution LLC Agent for: Wells Fargo Bank P.O. Box 390915 Minneapolis, MN 55439

RPM Agent for: 20818 44th Ave W Suite 140 Lynnwood, WA 98036

Sentry Credit Inc. Agent For: Nissan Motor Acceptanc 2809 Grand Ave. Everett, WA 98201

Snap-on Credit Llc 950 Technology Way Libertyville, IL 60048

Synergetic Communication Agent for: Nissan Motor Acceptanc 5450 N. W. Central #220 Houston, TX 77092

T-Mobile Bankruptcy Team PO Box 53410 Bellevue, WA 98015

Tennessee Attorney General's Office Bankruptcy Division PO Box 20207 Nashville, TN 37202-0207 The Holland Team 6120 Grrenwood Plaza Blvd #100B Englewood, CO 80111

The Medical Center Aurora 1501 S Potomac St Aurora, CO 80012

TMX Finance of Tennessee, INC d/b/a TitleMax
Legal Department
P.O. Box 8323
Savannah, GA 31412

Trans Union P O Box 2000 Chester, PA 19022

US Attorney's Office Howard H. Baker, Jr. U.S. Courthouse 800 Market St., Ste 211 Attn: Ann Holden or Civil Process Clerk Knoxville, TN 37902

US Dept of Education P.O. Box 5609 Greenville, TX 75403

US Dept of Education 50 United Nations Plaza Mailbox 1200, Suite 1273 San Francisco, CA 94102

Verizon Wireless National Recovery Operations Minneapolis, MN 55426

Weld County Colorado County Court 901 9th Avenue Greeley, CO 80631

Wells Fargo Bank Credit Bureau Dispute Resoluti Des Moines, IA 50306